

Application for Residential Gas.



Use this form if you are applying for:

- **Installation** of a new gas meter &/or service line and connection to gas supply OR
- **Addition/Alteration** to your existing gas supply OR
- **Removal/Abolishment** of your existing gas supply.

Please complete all sections relevant to your application as marked.

How to complete and submit this form.

IMPORTANT: You can complete this process online at agl.com.au/newconnections

This may speed up your application and quoting process. You'll also find all the other relevant forms and information you need to complete your application.

Alternatively, you can complete the form below and return it to us by:

Post: Return by registered mail addressed to **Locked Bag 14120 MCMC, Melbourne Victoria, 8001**

Email: gasnewconns@agl.com.au **Fax:** 1800 634 823

Should you need to contact an AGL customer service representative regarding your application, please call **1800 680 430**.

1. What service do you need?

Installation.

Meter fix
Service line must exist to have meter fix only request, if no service line please also tick below.
Applicable to SA only, preferred appointment time: / / AM/PM

Service line installation

COC or ESV: (mandatory for VIC only) / /

Addition/Alteration.

Upgrade meter
COC or ESV: (mandatory for VIC only) / /

Upgrade service line

Meter Alter Position MAP (excluding NSW)

Removal/Abolishment.

Removal of gas meter

Removal of gas service line AND meter (i.e. if property on the site is being demolished)

Site vacant date: / /

2. Supply address details.

Address.

Lot no: / Unit no: / Street no: / Street name: / Suburb: / Postcode: /

Deposited Plan Number: (optional) / Meter, MIRN or DPI no: /

I understand that full site access must be available. Should access be restricted, this may delay my request and additional fees may apply.

Mandatory for Additions/Alterations and Removals/Abolishments.

3. Your details.

a. Account holder.

Title: / Full name: / Date of birth: / / /

Business name: (if applicable) / ABN: (if applicable) /

Driver licence or Medicare no: / State: / Expiry date: / / /

Postal address: (if different to supply address) / Postcode: /

Telephone/mobile: / Fax: / Email: /

I agree to receive my confirmation pack, bills and other communication by email

AGL Account Number: (if applicable) /

b. Authorised contact person. (if different to above)

Title: / Full name: / Date of birth: / / /

Business name: (if applicable) / ABN: (if applicable) /

Driver licence or Medicare no: / State: / Expiry date: / / /

Postal address: (if different to supply address) / Postcode: /

Telephone/mobile: / Fax: / Email: /

4. Supply site specifics.

a. Plumber/installer. Installations and Additions/Alterations only.

Full name: / Licence no: / Telephone: /

4. Supply site specifics. (cont.)

b. What gas appliances are you connecting? Installations and Additions/Alterations only.

To ensure the correct meter is provisioned, please provide the hourly and total Megajoule (MJ) load. Without this information, your application cannot be processed.

Appliance	Qty	Hourly rate (MJ)	New or existing appliance?	Appliance	Qty	Hourly rate (MJ)	New or existing appliance?	Other appliances (please list)	Qty	Hourly rate (MJ)	New or existing appliance?
1. Cont. flow water heater				6. Central heater				11. Pool/spa heater*			
2. Storage water heater				7. BBQ				12. Solar gas boosted hot water			
3. Portable heater				8. Cooktop/cooker				13.			
4. Flued heater				9. Climate control				14.			
5. Gas log fire				10. Wall oven				15.			

Total (MJ) hourly rate

*Hourly MJ rate is mandatory for Pool/Spa heaters and any non standard appliances.

c. Dwelling information. Installations only - all States.

New or existing dwelling: New (incl. under construction) Existing Type of dwelling: House Duplex Unit Townhouse/villa Other

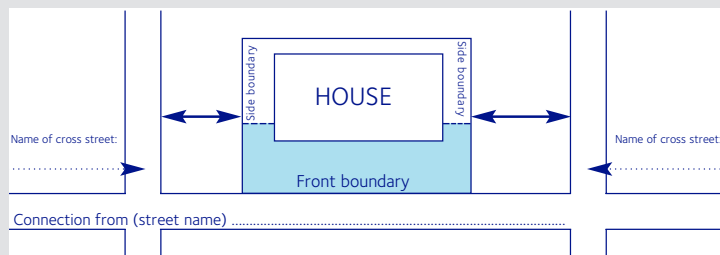
Single or strata dwelling: Single (incl. of site plan is preferred) Multiple (incl. of site plan is mandatory)

Lock up date: / /

d. Meter information. Installations only - NSW. Please note that incorrect information could result in a delay in installation and/or additional charges

Preferred meter position.

Please mark your preferred meter position on this diagram. The meter can be located between the front boundary and a position no more than two metres past the front fence of the dwelling, subject to gas fitting rules.



Distance between the proposed meter and the gas service:

Specific site conditions. (tick all that apply and provide length in metres where requested)

Tiered gardens m Pavers m Rock m Concrete m Rockeries m
 Shared driveway Sealed access greater than 25 metres Locked gates Other: (please list)

5. Your acceptance.

Your application.

Installations only.

I hereby authorise AGL to arrange for the Distributor to install natural gas at the supply address on the date the request is accepted, or as soon afterwards as can conveniently be arranged. I understand the acceptance of the Installation work is subject to an on-site check of conditions by the Distributor. Work is subject to availability of a suitable gas main at the property boundary. **N.B. The account holder must obtain written approval from the affected parties to lay pipes in any common service access areas for battle-axe, dual occupancy, common driveways, etc. I acknowledge that offers for the sale of natural gas are not available to all geographical areas and are subject to natural gas availability.** I acknowledge that, where available, then upon installation, gas will be sold to me at the supply address on the terms and conditions and the rates that apply under AGL's standard retail contract. The standard retail contract terms and conditions and a Basic Plan information document (NSW, SA and QLD)/ Energy Price Fact Sheet (VIC) that contains all the key plan information are available at agl.com.au I agree to accept the standard Installation charge, which will appear on the first account, unless the below section regarding third party payment is completed. I understand most Installation charges are passed-through by AGL from my Distributor and vary according to the works required and my distribution zone. AGL also applies a standard fee for an Installation request in NSW.

Additions/Alterations only.

I hereby authorise AGL to arrange for the Distributor to alter the gas at the supply address on the date the request is accepted, or as soon afterwards as can conveniently be arranged. I understand the acceptance of the Addition/Alteration work is subject to an on-site check of conditions by the Distributor. Work is subject to availability of a suitable gas main at the property boundary. **N.B. The account holder must obtain written approval from the affected parties to lay pipes in any common service access areas for battle-axe, dual occupancy, common driveways, etc.** I agree to accept the standard Addition/Alteration charge, which will appear on the next account, unless the below section regarding third party payment is completed. Most Addition/Alteration charges are passed-through by AGL from my Distributor and vary according to the works required and my distribution zone.

Removals/Abolishments only.

I hereby authorise AGL to arrange for the Distributor to completely remove the gas supply located at the supply address as requested on this form. Removal fees are charged by some Distributors which are passed-through by AGL and vary according to the works required and my distribution zone. Should my Distributor charge a fee, I agree to accept the standard Removal/Abolishment charge.

Acceptance of model standing offer. NSW, SA only.

I acknowledge that by submitting this form, I am indicating that the terms set out in the Distributor's model standing offer for basic connection services (a copy of which can be requested from my Distributor) are acceptable to me.

Important information about our Policies.

AGL's Privacy Policy and General Terms contain important details about the personal information AGL collects, how AGL collects it, where AGL sends it (including which countries), complaint handling, direct marketing and your rights and obligations. I authorise AGL to conduct a credit check and use any relevant information obtained about my credit history to enable AGL to establish my creditworthiness. By submitting this application, I acknowledge this information may be used to assess my application; to assess the credit which may be provided; to assist me to avoid default and to notify other credit providers of my default; to assist in the collection of overdue payments and to provide information to any person who proposes to guarantee or has guaranteed payment of my account. The Privacy Policy can be accessed via agl.com.au/privacy The terms and conditions of your products and services may also contain further provisions relevant to our handling of personal information.

By submitting this application, I acknowledge the Credit Reporting Policy sets out details specifically relating to AGL's handling of personal information obtained from credit reporting bodies and certain other consumer credit-related personal information ('credit information'). It applies to non-business customers who receive or apply for products or services on credit, and to any guarantor of a customer's credit with AGL. It includes details regarding the exchange of credit information with credit reporting bodies, other credit providers, guarantors, debt collectors, debt buyers and other parties, including information about payment defaults and serious credit infringements (fraud etc.). See the Policy for further details about which credit reporting bodies AGL uses and how to contact them to exercise your rights including rights to access, correct and place certain limitations on the handling of your credit information. The Credit Reporting Policy can be accessed via agl.com.au/privacy

Signature of account holder or authorised contact person.

Date.

 / /

6. Third party payment.

All fees and charges relating to the work will be paid for by the third party detailed below. If yes, the third party must complete the section below prior to submitting this form.

Title: Full name: Date of birth: / /

Business name: (if applicable) ABN: (if applicable)

Driver licence or Medicare no: State: Expiry date: / /

Postal address: Postcode:

Telephone/mobile: Fax: Email:

By signing here, the party nominated above is accepting charges for the works indicated at the supply address listed on this form.

Third party signature.

Date.

/ /