



Firstgas

Application for a Natural Gas Connection

Date of Application:				
Applicant Name:				
Applicant Phone Number:				
Email Address:				
Property Type:	New	Existing	Trench Provided:	Yes No
Residential / Commercial:				
Street Address:				
Suburb:				
City:				
Water Heating Appliance:				
Space Heating Appliance:				
Cooking Appliance:				
Other Appliance:				
Nominated Retailer:*				
Distance From Boundary: metres			
Meter Position:				
Date Gas Required:				

*Energy retailer from whom you will purchase natural gas – may even be the same as your electricity retailer

Notes (if any):

NATURAL GAS
GET CONNECTED

Call us:
0800 NEW GAS (639 427)

Email us:
connections@firstgas.co.nz

Visit our website:
www.firstgas.co.nz