

**KNG Energy**  
**Commercial Service Natural Gas Load Information**

**Customer Information**

**Business Name:** \_\_\_\_\_

**Service Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Site Contact:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Date Service Needed:** \_\_\_/\_\_\_/\_\_\_ **Billing Party for Meter Setting** \_\_\_\_\_

**Address of Billing Party:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**New Equipment Gas Load Requirements**

#	Type of Equipment	Equipment BTU
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Existing Equipment Gas Load Requirements (if applicable)**

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Total Connected Load**

\_\_\_\_\_

**Required Delivery Pressure: (please check one)**

7" WC    2 PSI    5PSI (must be approved by KNG)    Other \_\_\_\_\_

**Please complete the above information and send it back to:**

**KNG Energy**  
**1700 Westfield Drive**  
**Findlay, OH 45840**  
**Fax: 419-424-3309**