NATURAL GAS EXTENSION GRANT APPLICATION

	Applicant (Customer) Information			
Property Owner Name				
Mailing Address				
Talashana Numbor			_	
Telephone Number				
Legal Description				
Electoral Area served				
By signing below, the applicant is confirming that his/her portion of the mainline extension costs is available for payment to the appropriate Natural Gas Distribution Company.				
Signature of Applicant (Customer)				
Date				
C Total Cost to Pr Electoral Area D 75% of Total C E Less: Other Co F Remaining Bala G Maximum Electoral	Mainline Extension Inpany's Contribution Inpany's Contribution Inpany's Contribution: Cost to Property Intributions Itance Itanc	\$ \$ \$ \$ 5,000.00	\$ \$ \$ \$ \$	
For Natural Gas Company Use Only				
Application completed by				
Gas Company Representative Name: Phone Number: For Regional District Use Only			er:	
Date approved by Regional District		Ву:		