

LOCATION OF CONNECTION:

REASON FOR CONNECTION:

TYPE OF SERVICE:

_____ SALES
 _____ TRANSPORTATION
 _____ EXCHANGE
 _____ OTHER
 (Please explain in Remarks Section)

PROSPECTIVE DATE OF CONNECTION:

Pipelines to Be Connected	Status		Type of Connection		Estimated Gas Thru - Put		Term of Connection
	*Interstate	IntraState	One-way	Two-way	Max. Mcf/d	Min. Mcf/d	

*Is this Pipeline Jurisdictional to the F.E.R.C.? _____ Yes _____ No
 If Yes, Is the Applicant's Pipeline Exempt from Jurisdiction under the Natural Gas Act by the F.E.R.C.? _____ Yes _____ No
 If Yes, Attach a Statement Explaining Exemption from F.E.R.C. Jurisdiction.

NORMAL OPERATING PRESSURE RANGE

	Max. (psig)	Min. (psig)	Maximum Allowable Operating Pressure
Applicant			
Other Pipeline			

Attach Statement of Notification. Statement Shall Include List of any Other Intrastate Natural Gas Pipelines Connected with Either of the Pipelines Proposed for Connection.

REMARKS:

Address all communications concerning this application to:

I hereby certify that this application has been examined by me and that the Statements therein contained are to the best of my knowledge and belief true, correct and complete.

 NAME OF TRANSPORTER

Date: _____

 SIGNATURE

 TITLE