



RG&E Residential Natural Gas Service Package Contents

PACKAGE CONTENTS

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CUSTOMER RESPONSIBILITIES

- 1. Complete forms A, B and C and E** and return them electronically to RGE_ESI@rge.com or fax to 844.515.1574 or use the pre-addressed envelope that is included with this package of information. **Note:** Forms A, B and E require a signature.
- 2. Select a contractor** and arrange to have existing equipment converted to natural gas or new natural gas equipment installed. **Note:** All work must be in compliance with the National Fuel Gas Code; the New York State Fuel Gas Code; RG&E policies; all other applicable federal, state and municipal codes and regulations; and manufacturer's instructions.
- 3. Complete Form D.** Please have the completed form on hand so we can pick it up at the time service is turned on. **Note:** Form D must be signed by both you and your contractor.

Note Regarding Joint Trenches: Customers who want to provide their own trench must obtain approval and trench design requirements from the RG&E or contractor gas engineer assigned to their service before digging. A joint trench is where utilities in addition to natural gas service is being installed. Requirements of those other utilities should be considered in the design of trenches provided by customers. Please provide a minimum of two weeks advance notice to coordinate installation of pipe in the trench.

Note: 12 inches of horizontal separation is required between natural gas lines and other utilities in a joint trench.

Questions about this package of information? Contact us at 1.800.743.2110, Monday through Friday, 7:00 a.m. to 4:30 p.m. Using the automated system, press 3 for "Start or Stop Service, New Construction or Upgrades" and then press 3 again for "New Construction or Upgrading Service." Your call will be directed to a customer representative who will help you.



RG&E Residential Natural Gas Service Request Form

CUSTOMER BILLING INFORMATION > For contact and initial billing if required

Name _____

Address _____

City _____ State _____ ZIP _____

Telephone _____

PROJECT LOCATION > If different from address above

Address _____

City _____ State _____ ZIP _____

PROJECT INFORMATION

Describe the nature of your project: New Service Relocation Temporary Service

This request is for a: New Home Addition Existing Home Square Feet _____

Is a general contractor or HVAC contractor involved in this project? Yes (please provide contact information below) No

General Contractor _____

Address _____

City _____ State _____ ZIP _____

Contact Name _____ Telephone _____

HVAC Contractor _____

Address _____

City _____ State _____ ZIP _____

Contact Name _____ Telephone _____

METER DELIVERY PRESSURE REQUESTED

Standard (7 inches water column) Elevated (14 inches water column) Elevated _____ (Please specify)

If elevated pressure is requested, please explain why. _____

continued on back...

NATURAL GAS EQUIPMENT > Please itemize the input British thermal units (Btu) for each appliance.

> SPACE HEATING	EXISTING (If applicable)	NEW	TOTAL Btu/hr
Furnaces	Quantity _____ Btu/hr	Quantity _____ Btu/hr	_____
Boilers	Quantity _____ Btu/hr	Quantity _____ Btu/hr	_____
Fireplaces	Quantity _____ Btu/hr	Quantity _____ Btu/hr	_____
Space Heaters	Quantity _____ Btu/hr	Quantity _____ Btu/hr	_____
> COOKING	EXISTING (If applicable)	NEW	TOTAL Btu/hr
Ranges	Quantity _____ Btu/hr	Quantity _____ Btu/hr	_____
Ovens	Quantity _____ Btu/hr	Quantity _____ Btu/hr	_____
Outdoor Grills	Quantity _____ Btu/hr	Quantity _____ Btu/hr	_____
Outdoor Ranges	Quantity _____ Btu/hr	Quantity _____ Btu/hr	_____
> OTHER	EXISTING (If applicable)	NEW	TOTAL Btu/hr
Water Heaters (with tank)	Quantity _____ Btu/hr	Quantity _____ Btu/hr	_____
Tankless Water Heaters	Quantity _____ Btu/hr	Quantity _____ Btu/hr	_____
Pool/Spa Heaters	Quantity _____ Btu/hr	Quantity _____ Btu/hr	_____
Outdoor Gas Light	Quantity _____ Btu/hr	Quantity _____ Btu/hr	_____
Clothes Dryer	Quantity _____ Btu/hr	Quantity _____ Btu/hr	_____
Other _____	Quantity _____ Btu/hr	Quantity _____ Btu/hr	_____
Other _____	Quantity _____ Btu/hr	Quantity _____ Btu/hr	_____
> TOTAL CONNECTED Btu/hr			_____

Submitted by (Signature) _____

Name (Please print) _____ Date _____

All work must be in compliance with the National Fuel Gas Code; the New York State Fuel Gas Code; RG&E policies; all other applicable federal, state and municipal codes and regulations; and manufacturer's instructions.

Please email an electronic copy of this application to RGE_ESI@rge.com or fax to 844.515.1574 or mail to RG&E, Attn: Energy Service Installation, Customer Relations Center, 89 East Avenue, Rochester, NY 14649.



RG&E Natural Gas Service Commitment Letter

Dear Applicant,

Thank you for starting the process of obtaining natural gas service from RG&E. To bring natural gas to your home, piping is installed in a trench approximately 18 to 24 inches deep that runs from the main in the street to your home. Upon completion, RG&E restores the excavation by filling trench with existing soil. Other restoration that is not part of a typical natural gas service (such as pavement or sidewalk removal) is also done by RG&E. For new home construction, the area where piping will be located needs to be within 6 inches of the final grade before the natural gas service can be installed.

(A) EQUIPMENT INSTALLATION

Please check the appliance(s) you intend to convert or connect to natural gas and whether it will be within 3 months of gas service being installed at the address below or if you plan on installing the appliance in 1 to 3 years.

- | | | | | | | |
|---------------------|---------------------------------------|---------------------------------|---|--------------------------|---------------------------------------|---------------------------------|
| Furnaces or Boilers | <input type="radio"/> within 3 months | <input type="radio"/> 1-3 years | : | Water Heater (with tank) | <input type="radio"/> within 3 months | <input type="radio"/> 1-3 years |
| Fireplace | <input type="radio"/> within 3 months | <input type="radio"/> 1-3 years | : | Tankless Water Heater | <input type="radio"/> within 3 months | <input type="radio"/> 1-3 years |
| Space Heaters | <input type="radio"/> within 3 months | <input type="radio"/> 1-3 years | : | Pool/Spa Heater | <input type="radio"/> within 3 months | <input type="radio"/> 1-3 years |
| Ranges | <input type="radio"/> within 3 months | <input type="radio"/> 1-3 years | : | Outdoor Gas Light | <input type="radio"/> within 3 months | <input type="radio"/> 1-3 years |
| Ovens | <input type="radio"/> within 3 months | <input type="radio"/> 1-3 years | : | Clothes Dryer | <input type="radio"/> within 3 months | <input type="radio"/> 1-3 years |
| Outdoor Grills | <input type="radio"/> within 3 months | <input type="radio"/> 1-3 years | : | Other _____ | <input type="radio"/> within 3 months | <input type="radio"/> 1-3 years |
| Outdoor Ranges | <input type="radio"/> within 3 months | <input type="radio"/> 1-3 years | : | Other _____ | <input type="radio"/> within 3 months | <input type="radio"/> 1-3 years |

(B) SERVICE INSTALLATION

Please check the box that applies:

- I am ready for natural gas service and wish to have the service installed as soon as possible once all other requirements, permits, etc. have been satisfied. (This form must be received before RG&E can apply for any necessary permits.)
- I am not ready for service now but would like to schedule the natural gas service to be installed on or before _____
(Date service desired)

PLEASE READ THIS SECTION CAREFULLY AND COMPLETELY

I agree in signing below to the following:

- I will complete installation/conversion of my equipment, checked in section A (above) within 3 months from the date said service is installed by RG&E. I understand that if I do not, I will pay the full cost incurred by RG&E for the installation of this service.
- RG&E has no responsibility for my natural gas appliances and related natural gas equipment such as interior piping and fittings that I, my contractor or builder have installed or will install in the future, and I agree to take full and complete responsibility for my natural gas appliances and other natural gas equipment such as interior piping and fittings.
- I will install/cause to install and test all natural gas appliances and related natural gas equipment in accordance with the latest editions of all applicable codes and manufacturer's requirements.
- RG&E will only walk through and visually inspect my premises for the following non-standard conditions that appear in plain view: (1) improper use of piping materials, (2) missing or improper venting system, (3) inadequate appliance air supply and (4) inadequate clearances to combustibles. RG&E will not perform any other inspection activity or test or light pilot lights on my appliances. I agree I will cause my contractor to perform an air pressure test on the gas lines to ensure the lines are completely sealed and to otherwise make the premises ready and able to take natural gas service in accordance with all applicable codes.

Applicant Signature _____ Date _____

Service Address (Please Print) _____

Telephone _____

Please sign and return this letter to start the installation process for your natural gas service. You may email an electronic copy of this application to RGE_ESI@rge.com or fax to 844.515.1574 or mail to RG&E, Attn: Energy Service Installation, Customer Relations Center, 89 East Avenue, Rochester, NY 14649.



RG&E Proposed Natural Gas Service Location Drawing

CUSTOMER INFORMATION

Name _____

Service Address _____

INSTRUCTIONS

Please provide a small sketch of your existing or proposed building along with any significant landscaping and known utilities. This will help RG&E determine the best service location.

Checklist of items to identify on map (see example illustration below to the right)

- Property lines and dimensions to home
- Home, garage and porches
- Driveway, sidewalks, patios (non-grass areas)
- Trees, shrubs, flower beds, etc.
- Underground water/sewer lines and leach field (if known)

PROPERTY LINE

PROPERTY LINE

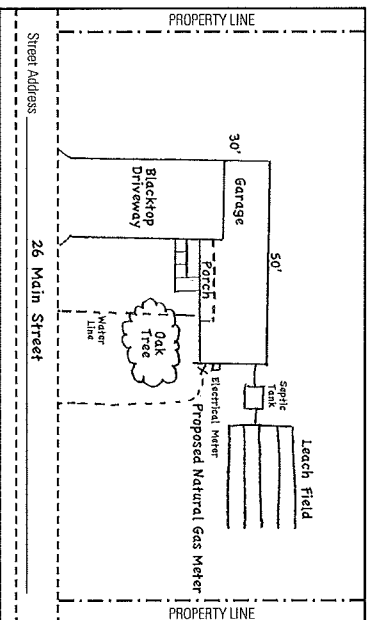
Street Address _____

FORM C Natural Gas Notification #: _____

WHERE YOUR NATURAL GAS METER WILL BE LOCATED

- RG&E's service will be installed 18 to 24 inches deep.
 - Meter **must** be installed outside of building and be readily accessible. The preferred location is near the electricity meter within 3 feet of either front corner of the house.*
 - Meter **cannot** be located within 2 feet of building openings (includes windows, doors, vents, etc.).
 - Meter **cannot** be located within 3 feet of any source of ignition (includes air conditioners, outlets, furnace vents, dryer vents, etc.).
 - RG&E reserves the final right to approve/designate meter location.
- * NOTE: RG&E will install up to 100 feet of service pipe from the street to the closest, suitable meter location at no cost for natural gas service. Additional fees will be assessed for locations that are chosen beyond this free allowance.**

EXAMPLE FOR ILLUSTRATION PURPOSES ONLY





RG&E Natural Gas Appliance Inspection Certificate

>> **This document must be completed/signed prior to your service being turned on. Do not return it with Forms A, B and C.** Please have the completed form on hand or located conspicuously so we can pick it up at the time service is turned on.

I hereby certify that, to the best of my knowledge and understanding, all natural gas appliances, along with the natural gas piping, chimney/vent system and related appurtenances, that have been installed by me or my designated contractor, are installed in accordance with all applicable codes and standards including the National Fuel Gas Code; the New York State Fuel Gas Code; RG&E policies; all other applicable federal, state and municipal codes and regulations; and manufacturer's instructions.

I also acknowledge all natural gas piping installed by me or my designated contractor has been subjected to and passed the pressure test requirements as outlined in applicable code.

Customer Name _____ Signature _____

Service Location (Street/City) _____

Daytime Phone _____ Evening Phone _____

Contractor Name _____ Signature _____

Daytime Phone _____ Evening Phone _____

Please check and complete the following information for each natural gas appliance that you are installing at this time. Please include the Btu input of the appliance, the brand name and tell us what fuel was being used for this purpose prior to this installation, if any.

	Btu Input	Brand Name	Previous Fuel	Date Connected	RG&E Use Only Dths
<input type="radio"/> Furnaces or Boilers	_____	_____	_____	_____	_____
<input type="radio"/> Fireplace	_____	_____	_____	_____	_____
<input type="radio"/> Space Heater	_____	_____	_____	_____	_____
<input type="radio"/> Range	_____	_____	_____	_____	_____
<input type="radio"/> Oven	_____	_____	_____	_____	_____
<input type="radio"/> Outdoor Grill	_____	_____	_____	_____	_____
<input type="radio"/> Outdoor Range	_____	_____	_____	_____	_____
<input type="radio"/> Water Heater (with tank)	_____	_____	_____	_____	_____
<input type="radio"/> Tankless Hot Water	_____	_____	_____	_____	_____
<input type="radio"/> Pool/Spa Heater	_____	_____	_____	_____	_____
<input type="radio"/> Outdoor Gas Light	_____	_____	_____	_____	_____
<input type="radio"/> Clothes Dryer	_____	_____	_____	_____	_____
<input type="radio"/> Other _____	_____	_____	_____	_____	_____
<input type="radio"/> Other _____	_____	_____	_____	_____	_____

RG&E USE ONLY

Name _____

Turn-on Date _____ By (Employee ID) _____

Natural Gas Meter Number _____ Residential Nonresidential



RG&E

Certificate of Compliance
Dwelling Converting to Electric or Natural Gas Space Heat

Description of structure: (Check as applicable)

- 1 or 2 Family Residence
- 3 or More Residences (____ Units)

Primary heating source:

- Electricity Natural Gas Other

LOCATION

Address _____

City _____ State _____ ZIP _____

CUSTOMER INFORMATION

Name _____ RG&E Account Number _____
(Office use only)

Please fill out item 1 or 2 below.

1. I _____
(Owner) am aware that the Minimum Insulation Standards for Dwellings Converting to Natural Gas or Electric

Space Heat requires my house to have storm doors, storm windows and at least R-19 (usually six inches) roof insulation. I certify that my building

at _____
(Location)

meets those requirements, or that I have obtained a waiver; and I understand that should my building be found not in compliance, a 25 percent surcharge on my utility bill may be imposed or electric or natural gas service may be discontinued.

The undersigned attests that all statements and representations contained in this certificate are true and accurate.

Signature of Owner _____

Address _____

2. I have inspected the building at _____
(Location)

owned by _____
(Owner) and certify that it meets the requirements of the Minimum Insulations Standards for Dwellings

Converting to Natural Gas or Electric Space Heat.

The undersigned attests that all statements and representations contained in this certificate are true and accurate.

Signature of Contractor _____ Date _____