Application for residential gas



Use this form if you are applying for gas alterations jobs only.

Please send your completed form to connections@sumo.com.au

□ connections@sumo.com.au

13 88 60 8.30am - 4.30pm AET weekdays

Postal Address: South Melbourne Market Street, PO Box 5329 South Melbourne, VIC 3205

Please complete all sections relevant to your application as marked.

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s details				
Unit No:		Street No:		
				Postcode:
Gas m	eter room	Building recess	Exterr	nal enclosure External (no enclosure
orks				
f the works red	quired:			
		Plumber I	License No:	
ails				
quired?	Combined/Bulk	k Hot Water	Combin	ned/Bulk Cooktop
ired: D D	/ M M / Y	YYY		
ading?	Yes No	Does the	service line	need upgrading? Yes No
ing?	Yes No			
oplicable):		Required	pressure fac	ctor (if applicable):
Yes	No Cur	rent MJ rating:		Required MJ rating:
	20.			
inces	5. NEW	appliances		6. Movement
MJ/hr	Pool heater:		MJ/hr	Does your meter and/or service line need to be moved?
MJ/hr	Hot water:		MJ/hr	
MJ/hr	Ducted:		MJ/hr	Meter: Yes No
MJ/hr	Cook top:		MJ/hr	Service line: Yes No
	Other:		MJ/hr	How far is the meter moving?
				How far is the service line moving?
	Unit No: Gas morks If the works red Indianal Services Inces MJ/hr MJ/hr MJ/hr	Gas meter room orks f the works required: ding? Yes No oplicable): Yes No Cur The Cook top: MJ/hr Ducted: MJ/hr Cook top:	Unit No: Street No: Street No: Gas meter room Building recess orks If the works required: Plumber I guired? Combined/Bulk Hot Water ired: D / M M / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Corks I the works required: Plumber License No: Plumber License No: Adding? Yes No Does the service line Oplicable): Required pressure far Yes No Current MJ rating: The works are the company of the compa