

APPLICATION FOR PARTIAL INTERRUPTION FOR GAS YEAR

To: Gas Operations, National Grid

Tel:.....

Fax

From: Shipper/Agent:Tel:..... Fax:.....

A: To be completed by Shipper/ Agent

Interruptible Supply Point Name:

Address and Post Code

Meter Point reference no(s) 1 2

3 4

Supply Point ID.....

Confirmation ID.....

Interruptible Supply Point Annual Quantity (AQ) kWh / year

Interruptible Supply Point Capacity (SOQ) kWh / day

Interruptible Supply Point Offtake Rate (SHQ) kWh / hour

Firm Supply Point Offtake Rate (if any) (SHQ) kWh / hour

				FOR National Grid USE ONLY		
Tranche	Tranche Quantity SHQ (kWh)	TNI Indicator	Interruption Allowance *	Tranche %	Tranche SOQ (kWh)	Tranche AQ (kWh)
1		Yes / No				
2		Yes / No				
3		Yes / No				
4		Yes / No				
5		Yes / No				
6		Yes / No				
7		Yes / No				
8		Yes / No				
9		Yes / No				
Total				100		

Tranches will be interrupted in the sequence above

* Days listed in decreasing order

Requested operational date _____

Signed by _____ for and on behalf of Shipper/ Agent

Name (printed) _____ Title: _____

Date _____

SIGN / DATE ORIGINAL AND RETURN TO NATIONAL GRID TO COMPLETE THE AGREEMENT

B: To be completed by National Grid

Administration Charge in respect of this application £

ACCEPTED by National Grid pursuant to Section G6.10 and operational with effect from.....

REJECTED by National Grid for the following reasons.....

Signed by _____ for and on behalf of National Grid

Name (printed) _____ Title: _____

Date _____

Note : Acceptance of this application allows the user to utilise the Partial Volume service during Supply & Demand Interruption

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National Grid plc

Registered Office: 1-3 Strand, London WC2N 5EH

Registered in England and Wales, No 4031152

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