

KANSAS GAS SERVICE
SERVICE LINE AND METER SET APPLICATION
 FORM 12159 (December 31, 2024)

STOP—do not complete until page 2 is reviewed and acknowledged
 REQUIRED - I have read and understand service line installation and billing requirements defined on page 2 of this application.

Please print and fill out form completely.

NAME (Requestor-see page 2) *		BUILDER <input type="checkbox"/> YES <input type="checkbox"/> NO	
MAILING ADDRESS		EMAIL ADDRESS	
CITY		ZIP CODE	
WORK PHONE		CELL PHONE	
SITE SUPERINTENDENT or FOREMAN NAME		SITE SUPERINTENDENT or FOREMAN PHONE#	
NAME (MECHANICAL ENGINEER OR PLUMBER)			
PHONE # MECHANICAL ENGINEER/ PLUMBER		EMAIL ADDRESS	

DATE	
STAGE OF COMPLETION (Check one) <input type="checkbox"/> Nothing Done/ Permit Only <input type="checkbox"/> Garage/Outbuilding <input type="checkbox"/> Dirt Work Only <input type="checkbox"/> Service Reconnect <input type="checkbox"/> Foundation Complete <input type="checkbox"/> Electric/Propane Conversion (existing) <input type="checkbox"/> Framing <input type="checkbox"/> Meter Set Only <input type="checkbox"/> Framed-In	
PROPOSED BUILDING COMPLETION DATE	DATE SERVICE LINE NEEDED

HARD SURFACE IN PATH OF SERVICE LINE?
 YES NO
 Additional charges may apply if hard surface is installed prior to service line installation. Casing may be required.

RATE INFORMATION Inside City Outside City

TYPE OF SERVICE MONTHLY BILLING RATE (choose one best associated with anticipated service requirements.) *

Residential Service
 Multi-Unit Residential # of Units ____ #Meters ____
 Multi-Unit Commercial # of Units ____ #Meters ____
 Commercial (<200 Mcf Annual)
 Commercial (200 – 1500 Mcf Annual)
 Commercial (>1500 Mcf Annual - Transport Eligible)
 Non-Residential Small Generator - ONLY

*Rate may be updated if deemed necessary based on usage.

SERVICE LINE INFORMATION

ADDRESS		UNIT NO.	
CITY		ZIP CODE	
MULTI METER MANIFOLD SETTING <input type="checkbox"/> N/A <input type="checkbox"/> YES IF YES -LIST ADDRESSES WITH SUITE/UNIT NUMBERS BELOW:			
NEAREST INTERSECTION			
SUBDIVISION or BUILDING NAME			
PHASE	LOT	BLOCK	
SECTION	TOWNSHIP	RANGE	

METER SET/ TURN-ON
 The gas meter will be set upon completion of the service line installation, provided we have received your inspection verification. There will be a \$10.00 plus taxes connection fee.

PROPOSED APPLIANCES

NO. of UNITS	BTU's	NO. of UNITS	BTU's
Furnace		Dryer	
Std Water Heater		Outdoor Grill	
Tankless WH		Pool Heater	
Range/Oven		Generator	
Fireplace		Other	
TOTAL NATURAL GAS LOAD			

DELIVERY PRESSURE REQUIREMENTS

Please indicate if a higher delivery pressure is required _____ psig*

*Delivery pressures higher than 7 inches water column (4 oz.) requires prior company approval. Elevated Pressure form available at www.kansasgasservice.com

SQUARE FOOTAGE

ADDITIONAL PROJECT INFORMATION

OFFICE USE ▶	CUSTOMER NO.	PREMISE NO.

See page 2 of Application with New Service Line Installation Requirements and Notice of Construction Billing

This application may be faxed to our TOLL FREE FAX NUMBER: 1-866-643-1390, or email _____

For all other inquiries, contact KGS Builder Services at 1-833-413-0254. Or visit our website www.kansasgasservice.com/planyourproject

