gaasivõrk

Application for change of consumption mode

Owner

Name* _____

ID-code/business registery code* _____

Address* _____

Phone* _____

E-mail* _____

Contact person _____

if it is different from the owner or there is an authorized legal person

Object details

Street/house/apartment* _____

County/city* _____

Postcode* _____

Cadastral identification number _____

The building is*

____ existing

____ new

Type of building*

____ apartment

____ house

____ terraced house

____ apartment building

____ else_____

Existing gas equipment*

____ gas boiler

____ gas stove

____ gas water heater

____ else _____

Additional planned gas equipment*

_____ gas boiler

_____ gas stove

_____ gas water heater

_____ else _____

Removable gas equipment*

_____ gas boiler

_____ gas stove

_____ gas water heater

_____ else _____

Planned gas consumption per hour(m^3/h)* _____ **Heated area** (m^2)* _____

Planned start of consumption _____

Additional information _____

_____   _____

           Date   Signature

*required field