New Mexico GAS COMPANY	APPLICATION FOR COMMERCIAL OR INDUSTRIAL MAINLINE EXTENSION				
Date		Requested Permanent Service Date			
Type of Project		Gas Relocation/Removal Required?			
		Date Required			
Project Name		Project Address			
City		Zip			
Mainline Extension Contact Information					
Name		Phone			
Cell Phone		Company Name			
Mailing Address		Email Address			
Other Contacts					
Architect/Engineer		Office Phone			
Cell Phone					
Mechanical Contractor		Office Phone			
Cell Phone					
Plumbing Contractor		Office Phone			
Cell Phone					
Contract Information					
Name		Title			
Address		City			
Zip		Phone			
Facility Information					
Building Type and Type of Business (Office, Manufacturing, Warehouse, Retail, etc)					
Square Footage		Hours of Operation (Weekdays)			
		Hours of Operation (Weekends)			

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Load Requirements					
BTUH load for each metered service from approved plans		Total BTUH Load			
Multiple Meters?		If Yes, Number of Gas Meters Required			
Delivery Pressure		Any other delivery pressure MUST be approved by the District Engineer before design can commence (see page 2)			
	re is the pressure required for you tt. Please check with your mechanic		erate. This will have a significant		
Is there any additional information NMGC needs to know about your project?					

Please print/fax or email this form to your local office