



# Service/Information Request Residential

**Company Requesting Information**

Company:	Phone No.:	
Contact Person	Phone No.:	
Address:		
City:	State:	Zip Code:
Project Name:		
Address:	Closest Intersection:	
City:	State:	Zip Code:

**Project**

**Information Required**

- Request for gas service     
  Preliminary inquiry of gas availability     
  Inquiry of rebate availability  
 Other (explain): \_\_\_\_\_  
 If existing customer, please give Washington Gas Account #  (only necessary for larger meter at existing address)

Please provide much of the following information as is available when filing out this request.

- Residential:*   
  Single Family   
  Townhouse   
  Garden Apartments   
  High Rise Apartments  
 Conversion   
  New Construction

List proposed equipment by type and BTUH input rating. List existing equipment that will continue to be utilized in the left columns. List new/added equipment in the right columns.

QTY.	Existing Equipment Description	BTU Input Rating	QTY.	New Equipment Description	BTU Input Rating
Total BTUH Input (All Equipment - New and Existing): Total BTUH					

	Gas Pressure Requested at Meter Outlet: <input type="checkbox"/> Standard low pressure (7" w.c.) <input type="checkbox"/> 2 PSIG
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**Important:** Please include two copies of site plan and additional mechanical drawings showing location of water, sewer, and other underground utilities, and desired location of gas service line and meters.

Today's Date:
Date Information Needed:
Date Gas Piping Installation Required:
Signature:
E-mail address:

**Email, Fax, or Mail**

Telesales Department  
 6801 Industrial Road, 3<sup>rd</sup> Floor  
 Springfield, Virginia 22151  
 Phone -703-941- HEAT (4328)  
 Fax: 703-750-7691  
 Email: [941Sales@washgas.com](mailto:941Sales@washgas.com)