

Complete this form to get help in evaluating a propane standby system for your location!

Form 636 EZ

## Confidential Gas Energy Profile - Propane Standby System Data

Name	<input type="text"/>	Company	<input type="text"/>
Title	<input type="text"/>	Address	<input type="text"/>
Phone	<input type="text"/>	Ext	<input type="text"/>
Fax	<input type="text"/>	Ext	<input type="text"/>
Email	<input type="text"/>	City	<input type="text"/>
		State	<input type="text"/>
		Zip	<input type="text"/>
		Country	<input type="text"/>

### Plant Location (If not shown above)

### Natural Gas Supply

How do you purchase natural gas at this location?

Local natural gas distribution company

Do you purchase "transported" gas?

Yes  No Supplier

Annual natural gas consumed

MMBtu/Dekatherm  Therm  Mcf

Natural gas delivery basis

Interruptible  Firm If both, please provide breakdown.

Total annual natural gas cost

If available, separate 'demand' and 'commodity' costs can be provided under Add'l Info below.

### Load Profile

What's your peak gas flow rate and normal distribution pressure?

Total connected natural gas load

MMBtuh (Millions of BTUs per hour.)

Facility gas distribution pressure

psig This is the pressure of the in-plant gas piping system(s).

Do you have any processes that must use natural gas (methane)?

Yes  No For example, atmosphere generators.

Are any changes in gas use planned?

Yes  No For example, facility and/or production expansions.

### Insurance

Some insurance carriers have special criteria for propane systems.

Factory Mutual  IRI/GE-GAP Other

### Other

What else may be of interest?

Do you use propane-fueled forklifts?

Yes  No If yes, how many?

Do you have other uses for propane?

Yes  No If yes, please explain.

### Additional Information

Please provide whatever additional information you believe may be of use in evaluating a propane standby system for your facility.

*If available, please send a **site plan** showing property lines and the location of natural gas meter(s).*

Return to...



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