

ELIZABETHTOWN NATURAL GAS DEPARTMENT  
301 Waterworks Dr, POST OFFICE BOX 550  
ELIZABETHTOWN, KENTUCKY 42702 - 270/765-6121 Ext. 215  
[kim.bell@elizabethtownky.gov](mailto:kim.bell@elizabethtownky.gov) or Fax: 270-737-7167

**APPLICATION FOR NATURAL GAS**

- INDUSTRIAL OR LARGE COMMERCIAL -

NAME OF CONTRACTOR \_\_\_\_\_ Phone: \_\_\_\_\_

NAME OF FACILITY REQUIRING GAS: \_\_\_\_\_

ADDRESS OF FACILITY REQUIRING GAS: \_\_\_\_\_

SALES CONTRACT DESIRED: \_\_\_\_\_ General Rate - Firm  
\_\_\_\_\_ High Load Factor Rate (For less than 100 MCF/day  
with 50% or greater load factor)  
\_\_\_\_\_ \*Industrial Interruptible Rate (priority interruptible)  
\_\_\_\_\_ \*Transportation Rate (fully interruptible)

GAS USAGE - indicates amount required for each time interval:

HEATING: \_\_\_\_\_ BTU/HR \_\_\_\_\_ CU FT/HR \_\_\_\_\_ MCF/DAY \_\_\_\_\_ MCF/YEAR\*\*

PROCESSING: \_\_\_\_\_ BTU/HR \_\_\_\_\_ CU FT/HR \_\_\_\_\_ MCF/DAY \_\_\_\_\_ MCF/YEAR\*\*

BOILER: \_\_\_\_\_ BTU/HR \_\_\_\_\_ CU FT/HR \_\_\_\_\_ MCF/DAY \_\_\_\_\_ MCF/YEAR\*\*

SIGNATURE OF APPLICANT \_\_\_\_\_ TITLE \_\_\_\_\_

THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_

**METERS ARE SIZED FOR 4 OZ (7" WATER COLUMN) PRESSURE. ELEVATED PRESSURE  
REQUIRES NATURAL GAS DEPARTMENT APPROVAL.**

**GAS APPLICATION APPROVAL**

(FOR OFFICE USE ONLY)

APPROVED \_\_\_\_\_ YES \_\_\_\_\_ NO

REMARKS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SIGNED BY \_\_\_\_\_ TITLE \_\_\_\_\_

THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_

\* Must have standby fuel capability and 50% or higher load factor

\*\* 1 MCF = 1000 cubic feet