New/Conversion Residential Gas Service Application

Before you begin, click File—Save As to save a copy of the application to your computer.

The Main Request Application must be completed and included with each service application.

See AmerenUE Construction Application Help for assistance completing this form.

***indicates required fields**

Submitted By

Name: _____ Phone Number: _____ Email Address: _____

Premise Street Address: _____

Gas Requirements

1. *Requested date for Ameren service completion: _____

2. *Are you converting to natural gas? ○ Yes ○ No
   If *Yes*, converting from: ○ Propane ○ Fuel Oil ○ Electric ○ Other
   If *Propane*, existing location of propane entrance: ○ Rear ○ Front ○ Left side ○ Right side

3. *Requested delivery pressure: ○ 7" W.C. ○ 2 PSIG
   If *2 PSIG* is selected, "an Elevated Delivery Pressure Request form will be required to be completed and returned by the customer. The requested elevated delivery pressure will result in a one time additional charge. The final determination of the delivery pressure and the charge will be made by Ameren's Engineering Representative."

4. *Gas Heat: ○ Yes ○ No

5. Estimated Total BTU/HR Load: _____

6. *Is detailed load information available? ○ Yes ○ No

Gas Appliances—Enter the number and BTU/HR of Gas Appliances

			Quantity	BTU/HR
7. Furnace(s):	○ Yes	○ No		
8. Water Heater(s):	○ Yes	○ No		
9. Stove/Oven:	○ Yes	○ No		
10. Dryer:	○ Yes	○ No		
11. Fireplace/Gas Log(s):	○ Yes	○ No		
12. Pool Heater:	○ Yes	○ No		
13. Jacuzzi/Hot Tub:	○ Yes	○ No		
14. Backup Generator:	○ Yes	○ No		
15. Other:	○ Yes	○ No		

16. *Gas Water Heater Type: ○ Unknown ○ Conventional Only ○ None ○ Conventional and On-demand ○ On-demand only

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***indicates required fields**

Submitted By

Name: _____ Phone Number: _____ Email Address: _____

Premise Street Address: _____

Property Characteristics

17. Approximate distance from the front property line to the front corner of the house: _____ ft.

18. Is meter requested on the garage side of the house? ○ Yes ○ No

19. Type of foundation: ○ Basement ○ Slab ○ Crawl space ○ Mobile Home ○ Duplex/multi-family

20. Is foundation backfilled? ○ Yes ○ No

21. Is lot within 6" of final grade? ○ Yes ○ No

22. *Are there any private underground facilities (i.e. sprinkler systems, electric facilities, fire protection water service security systems, spare conduit systems, etc.)? ○ Yes ○ No ○ Unknown

If *Yes* or *Unknown*, please specify: _____

NOTICE: Customers are responsible for locating/marking their private facilities.

23. *Will there be existing/proposed obstruction in the path of service (i.e. driveways, sidewalks, landscaping, retaining walls, etc.)? ○ Yes ○ No ○ Unknown

If *Yes* or *Unknown*, please specify: _____

Additional Project Information

Contact Information

24. *Use Main Request Application Contact? ○ Yes ○ No—If *No,* please complete the *Contact Details* section.

Contact Details

Contact Name: _____

Contact Type: ○ Builder ○ Electrician ○ Customer ○ Landlord ○ Developer ○ General Contractor ○ Consulting Engineer ○ Other

Phone: _____ Extension: _____ Cell: _____ Fax: _____

Email Address: _____

Remember to save a copy of your completed application. Completed applications can be attached and emailed to constructionhotline@ameren.com or faxed to AmerenUE Construction Hotline at 314.641.2406 or 888.738.0620. Each service application must include the Main Request Application.

Save As Print Form