



Trans Québec & Maritimes Pipeline Inc. (TQM)

APPLICATION FOR SERVICE: REQUEST FOR NEW OR MODIFIED RECEIPT MEASUREMENT FACILITY

Complete this form to request receipt on the TQM Pipeline System that requires new receipt facilities or modifications to existing receipt stations.

APPLICATION DATE _____

CUSTOMER INFORMATION

Table with 2 columns: Field Name, Value. Fields include Company Name, Address, Telephone No., Fax No.

Table with 3 columns: Field Name, Technical Contact Information, Commercial / Other Contact Information. Fields include Contact Name, Telephone No., Email Address.

RECEIPT INFORMATION

Part I: Receipt Point Information

Requested In-Service Date: _____

Type of Request (please indicate an "x")

- Request options: New Receipt Station, Existing Station - Producer Tie-In, Existing Station - Capacity Expansion, Existing Station - Other Modifications*

Receipt Station Purpose (please indicate an "x")

- Purpose options: Storage, Production, Interconnection, Extraction

*Other Modifications refers to non-capacity related modifications; for example, a request for telemetry information

If New Station Request:

Preferred location (location description; attach map if available):

Two horizontal lines for providing location information.



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If Existing Station Request:

Receipt Station name and/or description of location: _____

Flow ($10^3\text{m}^3/\text{d}$)

	Minimum Flow ($10^3\text{m}^3/\text{d}$)	Maximum Flow ($10^3\text{m}^3/\text{d}$)	Average Flow ($10^3\text{m}^3/\text{d}$)
Current Flow			
Incremental Flow			
Total Flow			

Additional Comments: _____

Part II: Upstream / Processing Information

Plant Name	
Plant Location	
Plant Operator	
Contact Name	
Telephone No.	

Plant Type (please indicate an “x” for the appropriate boxes)

- New plant
 Existing plant

Plant Capacities ($10^3\text{m}^3/\text{d}$):

Current Sales Capacity (if applicable)	
Expansion Capacity (if applicable)	
Total Sales Capacity	



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Part III: Gas Quality Information

Please forward a raw gas analysis with this application. Failure to do so could result in a delay in on-stream, or inappropriate facility construction.

Does your sales gas comply with the following gas quality tariff specifications listed below?

Yes No

If no, indicate the levels expected in the table below:

Gas Composition	Tariff Specifications	Level Expected
Hydrocarbon Dew Point	-10 °C	
Hydrogen Sulphide	23 mg/m ³ (16 ppm)	
Total Sulphur	115 mg/m ³ (80 ppm)	
Carbon Dioxide	2%	
Water Vapour	65 mg/m ³ (4 lbs/mmcf)	
Water Dew Point (pressure > 5500 kPa)	-10 °C	
Temperature	50 °C	
Oxygen	0.4%	
Gross Heating Value	36 MJ/m ³	

Are there any connected sources of gas, prior to blending or processing, with H₂S levels in excess of the TQM Pipeline System Tariff limit of 16 ppm? Yes No

Additional Comments: _____

APPLICATION SUBMITTED BY:

Name (print): _____

Position: _____

Telephone: _____

Fax: _____

Signature: _____