

Application for change of consumption mode

Owner

Name *

_____ *First and family name or Company name*

ID-code/business registry code*

Address *

Phone *

E-mail *

Contact person

_____ *if it is different from the owner or there is an authorized legal person*

Object details where you want to change the consumption conditions

Street/house/apartment*

County/city *

Postcode *

Cadastral identification number

The building is *

existing

new

Type of building *

apartment

house

terraced house

apartment building

other _____

Existing gas equipment

_____ gas stove, power (kW) _____

_____ gas water heater, power (kW) _____

_____ gas boiler, power (kW) _____

_____ other _____

Additional planned gas equipment

____ gas stove, power (kW) ____
____ gas water heater, power (kW) ____
____ gas boiler, power (kW) ____
____ other _____

Removable gas equipment

____ gas stove, power (kW) ____
____ gas water heater, power (kW) ____
____ gas boiler, power (kW) ____
____ other _____

Planned gas consumption per hour(m³/h) _____ **Heated area** (m²) _____

Planned start of consumption _____

Additional information _____

Date

Signature

* *required field*