TransGas
YOUR LINK TO SUCCESS

Application for Firm Transportation Service
Receipt or Delivery

_____ (the "Shipper") requests the following Firm Transportation Service:

Meter/CTP Code	Meter Name	GJ/day

The Shipper requests that this Firm Transportation Service be effective on _____, 20___ to _____, 20___.

The Shipper understands that, prior to any requested Firm Transportation Service becoming effective, this request is subject to review and approval by TransGas, in accordance with TransGas' Policies and Procedures.

The Shipper further agrees that by virtue of this request for Firm Transportation Service, the Shipper is granting authorization to TransGas that, in the event the request is approved by TransGas, TransGas has the authority to make any necessary amendments to the Shipper's Transportation Schedule of Service or issue a new Transportation Schedule of Service in order to achieve the requested Firm Transportation Service. The Shipper agrees to be bound by the terms and conditions of any such Transportation Schedule of Service or amendment thereof.

I hereby warrant in favor of TransGas that I have the authority to sign this request for Firm Transportation Service and authorize the issuance or amendment of the Transportation Schedule of Service on behalf of the Shipper.

Agreed and accepted this _____ day of _____, 20___.

Per: _____ _____

Printed Name of Company (Shipper) **Signature**

Fax to: (306) 789-6224 or EMAIL: CustServ@transgas.com