

Union Gas Application Centre
 Phone: 1-866-7721045

-
- Meter Set
-
-
- Meter Turn On
-
-
- Inspection

Contractor:	Submitted Date:
Phone #:	Cell #:
Email:	

All requests will be confirmed within 24 hours of being received. Please confirm by:

-
- The above EMAIL address
-
- The above PHONE number
-
- The above CELL number

PLEASE ALLOW AT LEAST 4 BUSINESS DAYS NOTICE to plan for the set / turn on / inspection.

Ontario Regulations require all appliances intended to be installed at the time of occupancy, to be inspected by Union Gas prior to being put into use and before occupancy for all premises that are supplied with gas for the first time. The exception being the activation of construction heat by a holder of a certificate or record of training for that purpose. Please be prepared for the inspection by ensuring all equipment is operational. Changes may apply if not ready.

Access Instructions / Additional Details:

Contact / Homeowner :	Phone #:

City / Town	Lot	Civic	Street	Required Date (YY/MM/DD) <small>(Please allow a minimum of 4 working days. You will receive confirmation)</small>	Appliances to be Inspected
				<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> Furnace _____ <input type="checkbox"/> Range _____ <input type="checkbox"/> Wtr Htr _____ <input type="checkbox"/> Dryer _____ <input type="checkbox"/> Fireplace _____ <input type="checkbox"/> _____ <input type="checkbox"/> Other _____ <input type="checkbox"/> _____
				<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> Furnace _____ <input type="checkbox"/> Range _____ <input type="checkbox"/> Wtr Htr _____ <input type="checkbox"/> Dryer _____ <input type="checkbox"/> Fireplace _____ <input type="checkbox"/> _____ <input type="checkbox"/> Other _____ <input type="checkbox"/> _____
				<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> Furnace _____ <input type="checkbox"/> Range _____ <input type="checkbox"/> Wtr Htr _____ <input type="checkbox"/> Dryer _____ <input type="checkbox"/> Fireplace _____ <input type="checkbox"/> _____ <input type="checkbox"/> Other _____ <input type="checkbox"/> _____
				<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> Furnace _____ <input type="checkbox"/> Range _____ <input type="checkbox"/> Wtr Htr _____ <input type="checkbox"/> Dryer _____ <input type="checkbox"/> Fireplace _____ <input type="checkbox"/> _____ <input type="checkbox"/> Other _____ <input type="checkbox"/> _____
				<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> Furnace _____ <input type="checkbox"/> Range _____ <input type="checkbox"/> Wtr Htr _____ <input type="checkbox"/> Dryer _____ <input type="checkbox"/> Fireplace _____ <input type="checkbox"/> _____ <input type="checkbox"/> Other _____ <input type="checkbox"/> _____
				<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> Furnace _____ <input type="checkbox"/> Range _____ <input type="checkbox"/> Wtr Htr _____ <input type="checkbox"/> Dryer _____ <input type="checkbox"/> Fireplace _____ <input type="checkbox"/> _____ <input type="checkbox"/> Other _____ <input type="checkbox"/> _____
				<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> Furnace _____ <input type="checkbox"/> Range _____ <input type="checkbox"/> Wtr Htr _____ <input type="checkbox"/> Dryer _____ <input type="checkbox"/> Fireplace _____ <input type="checkbox"/> _____ <input type="checkbox"/> Other _____ <input type="checkbox"/> _____
				<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> Furnace _____ <input type="checkbox"/> Range _____ <input type="checkbox"/> Wtr Htr _____ <input type="checkbox"/> Dryer _____ <input type="checkbox"/> Fireplace _____ <input type="checkbox"/> _____ <input type="checkbox"/> Other _____ <input type="checkbox"/> _____