*Indicates a mandatory field

SECTION 1: GENERAL (APPLICABLE TO ALL ACCESS REQUESTS)

Item			Description
1.	Name of Customer*		
2.	ABN*		
3.	Downstream Gas Usage		
4.	Contact Details	Name*	
		Position*	
		Phone Number*	
		Email*	
5.	Service(s)* Sought	PCA Back Haul Swap	☐ **If selected, please complete Section 2 of this form**
		PCA Firm Forward Haul	☐ **If selected, please complete Section 3 of this form**
		PCA Standard Storage	☐ **If selected, please complete Section 4 of this form**
		PCA Premium Haulage	☐ **If selected, please complete Section 5 of this form**
		PCA As Available Storage	☐ **If selected, please complete Section 6 of this form**
		PCA Linepack Loan	☐ **If selected, please complete Section 7 of this form**
		PCI Haulage Service	☐ **If selected, please complete Section 8 of this form**
		Other	☐ **If selected, please complete Section 9 of this form**

SECTION 2: APPLICABLE TO THE PCA BACK HAUL SWAP SERVICE ONLY

1.	Proposed Service Commencement Date*	
2.	Proposed Service Expiration Date*	
3.	Proposed Existing Swap Delivery Point/s*	
4.	Proposed Existing Swap Receipt Point/s*	
5.	New Swap Delivery Point/s Required*	☐ YES ☐ NO **If YES, complete the Pipeline Interconnection Request Form available here**
6.	Forecast Annual Flow TJ per Annum	
7.	Forecast Peak Daily Flow TJ/d*	
8.	Forecast Peak Hourly Flow TJ/h	

SECTION 3: APPLICABLE TO THE PCA FIRM FORWARD HAUL SERVICE ONLY

1.	Proposed Service Commencement Date *	
2.	Proposed Service Expiration Date*	
3.	Proposed Existing Delivery Point/s*	
4.	Proposed Existing Receipt Point/s*	
5.	New Delivery Point/s Required*	☐ YES ☐ NO **If YES, complete the Pipeline Interconnection Request Form available here**
6.	New Receipt Point/s Required*	☐ YES ☐ NO **If YES, complete the Pipeline Interconnection Request Form available here**
7.	Forecast Annual Flow TJ per Annum	
8.	Maximum Daily Flow TJ/d*	
9.	Maximum Hourly Flow TJ/h*	
10.	Expected Seasonal Shutdown Periods*	**Please provide indicative timing and duration**

SECTION 4: APPLICABLE TO THE PCA STANDARD STORAGE SERVICE ONLY

1.	Proposed Service Commencement Date *	
2.	Proposed Service Expiration Date*	
3.	Proposed Standard Storage MDQ TJ*	

SECTION 5: APPLICABLE TO THE PCA PREMIUM STORAGE SERVICE ONLY

1. **Proposed Service Commencement Date ***	
2. **Proposed Service Expiration Date***	
3. **Proposed Existing Delivery Point/s***	
4. **Proposed Existing Receipt Point/s***	
5. **New Delivery Point/s Required***	☐ YES ☐ NO **If YES, complete the Pipeline Interconnection Request Form available here**
6. **New Receipt Point/s Required***	☐ YES ☐ NO **If YES, complete the Pipeline Interconnection Request Form available here**
7. **Proposed Premium Storage MDQ TJ***	

SECTION 6: APPLICABLE TO THE PCA AS AVAILABLE STORAGE SERVICE ONLY

1. **Proposed Service Commencement Date ***	
2. **Proposed Service Expiration Date***	
3. **Proposed Standard Storage MDQ TJ***	

SECTION 7: APPLICABLE TO THE PCA LINEPACK LOAN SERVICE ONLY

1. **Proposed Service Commencement Date ***	
2. **Proposed Service Expiration Date***	
3. **Proposed Loan MDQ TJ***	

SECTION 8: APPLICABLE TO THE PCI HAULAGE SERVICE ONLY

1. **Proposed Service Commencement Date ***	
2. **Proposed Service Expiration Date***	
3. **Proposed Existing Delivery Point/s***	
4. **Proposed Existing Receipt Point/s***	
5. **New Delivery Point/s Required***	☐ YES ☐ NO **If YES, complete the Pipeline Interconnection Request Form available here**

6. **New Receipt Point/s Required***	☐ YES ☐ NO **If YES, complete the Pipeline Interconnection Request Form available here**	
7. **Forecast Annual Flow TJ per Annum**		
8. **Maximum Daily Flow TJ/d***		
9. **Maximum Hourly Flow TJ/h***		
10. **Expected Seasonal Shutdown Periods***	**Please provide indicative timing and duration**	

SECTION 9: APPLICABLE TO REQUESTS FOR OTHER THAN BACK HAUL SWAP, FIRM FORWARD HAUL, STANDARD STORAGE, PREMIUM STORAGE, AS AVAILABLE STORAGE AND LINEPACK LOAN SERVICES

1. **Describe the service being sought and reason for the request.** **Please also attach any relevant supporting documentation to this request.**		
2. **Proposed Service Commencement Date***		
3. **Proposed Service Expiration Date***		
4. **Proposed Existing Delivery Point/s***		
5. **Proposed Existing Receipt Point/s***		
6. **New Delivery Point/s Required***	☐ YES ☐ NO **If YES, complete the Pipeline Interconnection Request Form available here**	
7. **New Receipt Point/s Required***	☐ YES ☐ NO **If YES, complete the Pipeline Interconnection Request Form available here**	
8. **Forecast Annual Flow TJ per Annum**		
9. **Forecast Peak Daily Flow TJ/d***		
10. **Anticipated Daily or Hourly load profile**		
11. **Forecast Peak Hourly Flow TJ/h***		

SECTION 10: PROPOSED CREDIT SUPPORT

1. **Proposed form of credit support (refer SEA Gas' Standard Terms for the relevant Service for alternatives)***	

SECTION 11: CONFIDENTIALITY

Access Requests to be accompanied by a signed copy of SEA Gas' Confidentiality Agreement, which is available here for download**.**

INTERNAL OFFICE USE ONLY:
Date Received: Comments:
Staff Members Name: Title: