



Transmission Connection Forms

Updated on: 1 April 15

Transmission Connection Forms

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4	GTP106	Statement of Admittance of Gas
5	GTP106A	Statement of Interim Admittance of Gas
6	GTP107	Application for Gas Turn-on
7	GTP108	Certification of Completion (Consumer's Internal Pipe)
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APPLICATION FOR GAS TRANSMISSION CONNECTION

Date: _____

For internal use

To: PowerGas Ltd
c/o HOS (Gas Network Planning)
SP PowerGrid Ltd

Ref No. : _____

Through Shipper

Signature of Shipper Representative
Name / Designation

Name of Shipper

GAS CONNECTION TO:

(Project Name)

(Address of Premise / Development)

I would like to apply for connection to the PowerGas' gas pipeline network for the above project.

I hereby submit the following documents:

- Consumer Project Data Sheet (Form GTP102)
- Location / site plan showing the proposed site and connection point
- Pipe route from property boundary to the Meter Installation and location of Meter Installation where applicable.

The expected date of connection and gas admittance is: _____

Owner / Developer * of the project

Name : _____

Address : _____

Name of Applicant: _____

Designation: _____

Company: _____

Signature / Date

Consumer Project Data Sheet

Consumer Information			
Gas user name :			
Gas installation address :			
Mailing address :			
Consumption Information			
Application of Gas :	Genco / Co-Gen / Tri-Gen / Boiler / Cooking / Water Heating / Others*	Issued with Generator Licence?	Yes / No *
	If Others, please specify : _____	Generating Capacity	
Gas Consumption Duration per Day	8 / 12 / 24* hours or specify : _____		
Expected Gas Admittance Date (DD/MM/YY)			
Delivery Pressure and Flowrate			
Injection point (location)			
Offtake point (location)			
Meter Installation by Transporter?	Yes / No *		
Load profile	Year 1	mmBtu / hr	
	Year 2	mmBtu / hr	
	Year 3	mmBtu / hr	
	Year 4	mmBtu / hr	
	Year 5	mmBtu / hr	
Maximum Daily Quantity	BBtud		
Meter sizing parameters	Max Flowrate	BBtu / hr	
	Min Flowrate	BBtu / hr	
Minimum pressure required at Gas Service Isolation Valve (GSIV)	barg		
Design pressure of user's gas facility:	barg		

Submitted by Applicant	Confirmation by Shipper
Name of Company :	Name of Shipper :
Name of Officer :	Name of Officer :
Designation :	Designation :
Date :	Date :
Signature :	I agree with the above information provided by the applicant. Signature:

Note :The above is for information purposes only. PowerGas may not be able to nor is obliged to fulfill any of the above requirements.

**Delete where applicable*

APPLICATION FOR ADMITTANCE OF GAS

PowerGas Ltd
c/o HOB (Gas Network Projects)
SP PowerGrid Ltd

Your Ref: _____

Through Shipper

Signature of Shipper Representative
Name / Designation

Name of Shipper

(Name of Project)

(Address of Premises / Development)

(A) I, the Designated Representative of the above project, certify that the Gas Fitting from, but excluding, the GSIV up to, [and including / but excluding]*, the Meter Installation, has been,

- Designed and constructed in accordance with the requirements of the relevant Legislations, Regulations, Codes and Practices. A copy of the "Certificate of Completion" (Form GTP108A) is attached;
- Successfully tested and passed the final pressure test and that it is leak free. A copy of the "Certificate of Final Pressure Test" (Form GTP109A) is attached;
- Capped / blanked / plugged off at all end points

I certify that the Consumer's Internal Pipe is not connected to and is physically separated from the outlet of the Meter Installation.

I further certify that the Gas Fitting from, but excluding, the GSIV up to and including the Meter Installation is ready to receive gas.

I undertake to conduct the necessary proof test on the Gas Fitting from, but excluding, the GSIV up to, [and including / but excluding]*, the Meter Installation and submit the "Certificate of Proof Test" (Form GTP110A) immediately prior to the connection and gas admittance.

Signature and Stamp of PE / Date

Name: _____

PE No. : _____

(B) I hereby request for admittance of gas to the Gas Installation / Gas Fittings up to the Meter Installation outlet on _____.

Signature of Applicant / Date

Name: _____

Designation: _____

**Delete where applicable*

To the Shipper: This is to confirm gas admittance shall be carried out on _____. Please notify all relevant personnel to be present on site. _____ SPPG Officer-in-charge
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To: _____
(Name of Applicant)

For: _____
(Gas Installation or gas fitting's Address)

STATEMENT OF ADMITTANCE OF GAS

1 Upon your request, we admitted natural gas up to the outlet valve of the Meter Installation on ____/____/____ at about _____ hrs at the nominal pressure of _____ barg. The Gas Installation or Gas Fitting from the Gas Service Isolation Valve (GSIV) to the outlet valve of the Meter Installation is henceforth connected to the gas supply system.

2 The applicant and Designated Representative (DR) are required to notify all parties concerned, including but not limited to the responsible person, owner, developer, architect, engineer, main contractor and sub-contractors, suppliers, vendors etc. that gas has been admitted into the Gas Installation or Gas Fitting up to the outlet valve of the Meter Installation and to take all necessary precautions to prevent tampering and/or damages to the gas pipes.

3 The applicant and DR are to ensure compliance with all applicable legislation and codes of practice governing such Gas Installation or Gas Fitting including the latest version of the Gas Act (Cap 116A), the Gas (Supply) Regulations 2008 and the Gas Supply Code.

4 If you detect or suspect any gas leaks, please contact our 24-hours Customer Service Centre at Telephone 1800-752-1800 immediately.

Name of SPPG Representative
SP PowerGrid Ltd
As Agent for and on behalf of PowerGas Ltd

Signature / Date

Acknowledged by:

Signature / Date
Name of Applicant: _____
Designation: _____
Company: _____

Signature and stamp / Date
Name of PE: _____
PE No. : _____

To: _____
(Name of Responsible Person)

For: _____
(Gas Installation's Address)

STATEMENT OF INTERIM ADMITTANCE OF GAS

1 Please be informed that, upon your certification of successful conduct of proof test and request for interim admittance of gas, the GSIV was opened and gas was admitted into the Gas Installation or Gas Fitting for the purpose of purging and commissioning on _____ (date) at about _____ (time).

2 Please proceed to purge and commission the Gas Installation or Gas Fitting up to [and including / but excluding]* the Meter Installation immediately.

3 Please notify us upon completion of the purging and commissioning. If we do not hear from you by _____ (date/time), we will terminate the gas supply to the Gas Installation or Gas Fitting and thereafter you are required to re-apply for admittance of gas in accordance to the requirements of the Gas Supply Code.

Name & Designation:
SP PowerGrid Ltd
As agent for and on behalf of PowerGas Ltd

To : PowerGas Ltd
c/o SPPG representative

1 I hereby certify that the Gas Installation or Gas Fitting from the GSIV up to [and including / but excluding]* the Meter Installation has been successfully purged and commissioned.

2 I further certify that all end points of the Gas Installation/Gas Fitting have been affixed with warning labels marked "Live Gas. Do Not Tamper!" as stipulated in CP51:2004.

Signature and Stamp of PE / Date

Name : _____

PE No. : _____

*Delete where applicable

APPLICATION FOR GAS TURN-ON

PowerGas Ltd
c/o HOB (Gas Network Projects)
SP PowerGrid Ltd

Your Ref: _____

Through Shipper

Signature of Shipper Representative
Name / Designation

Name of Shipper

(Name of Project)

(Address of Premises / Development)

(A) I, the Designated Representative of the above project, certify that the Consumer's Internal Pipe for the above project, from the Meter Installation outlet to the appliances / equipment, has been,

- Designed and constructed in accordance with the requirements of the relevant Legislations, Regulations, Codes and Practices. A copy of the "Certificate of Completion" (Form GTP108) is attached;
- Successfully tested and passed the final pressure test and that it is leak free. A copy of the "Certificate of Final Pressure Test" (Form GTP109) is attached;
- Capped / blanked / plugged off at all end points

I further certify that the Consumer's Internal Pipe from the Meter Installation outlet up to the appliances / equipment is ready to receive gas.

I undertake to conduct the necessary proof test on the Consumer's Internal Pipe and submit the "Certificate of Proof Test" (Form GTP110) immediately prior to the connection and gas turn-on.

Signature and Stamp of PE / Date

Name: _____

PE No. : _____

(B) I hereby request for gas turn-on to the Consumer's Internal Pipe up to the appliances / equipment on _____.

Signature of Applicant / Date

Name: _____

Designation: _____

To the Shipper:

This is to confirm gas turn-on shall be carried out on _____. Please notify all relevant personnel to be present on site.

SPPG Officer-in-charge

CERTIFICATE OF COMPLETION

PowerGas Ltd
c/o HOB (Gas Network Projects)
SP PowerGrid Ltd

Your Ref : _____

Through Shipper

Signature of Shipper Representative
Name / Designation

Name of Shipper

(Name of Project)

(Address of Premises / Development)

I, the Designated Representative of the above project, hereby certify that the Consumer's Internal Pipe for the above project, from, but excluding, the Meter Installation to the appliances / equipment have been designed and all gas service works have been carried out in compliance with the requirements of the latest revision of the following:

- Gas Act (Cap 116A);
- Gas (Supply) Regulations 2008;
- Gas (Metering) Regulations 2008;
- Gas Supply Code;
- Gas Metering Code;
- Code of Practice for Manufactured Gas Pipe Installation, Singapore Standard, CP 51:2004;
- Other relevant code / standard : _____ (please specify for installation with operating pressure higher than 20 kPa)
- All relevant acts, regulations and rules which are applicable to the gas installation;

2 I further certify that the design pressure of the above Consumer's Internal Pipe is _____ barg.

Signature and Stamp of PE / Date

Name : _____

PE No. : _____

CERTIFICATE OF COMPLETION

PowerGas Ltd
c/o HOB (Gas Network Projects)
SP PowerGrid Ltd

Your Ref: _____

Through Shipper

Signature of Shipper Representative
Name / Designation

Name of Shipper

(Name of Project)

(Address of Premises / Development)

I, the Designated Representative of the above project, hereby certify that the Gas Fitting for the above project from, but excluding, the GSIV up to [and including / but excluding]* the Meter Installation have been designed and all gas service works has been carried out in compliance with the requirements of the latest revision of the following:

- Gas Act (Cap 116A);
- Gas (Supply) Regulations 2008;
- Gas (Metering) Regulations 2008;
- Gas Supply Code;
- Gas Metering Code;
- Code of Practice for Manufactured Gas Pipe Installation, Singapore Standard, CP 51:2004;
- Other relevant code / standard : _____ (please specify for installation with operating pressure higher than 20 kPa)
- All relevant acts, regulations and rules which are applicable to the gas installation;

2 I further certify that the design pressure of the above Gas Fitting is _____ barg.

Signature and Stamp of PE / Date

Name: _____

PE No. : _____

**Delete where applicable*

CERTIFICATE OF FINAL PRESSURE TEST

PowerGas Ltd
c/o HOB (Gas Network Projects)
SP PowerGrid Ltd

Your Ref: _____

Through Shipper

Signature of Shipper Representative
Name / Designation

Name of Shipper

(Name of Project)

(Address of Premises / Development)

I, Designated Representative of the above project, hereby certify that the Consumer's Internal Pipe for the above project, from the Meter Installation to the appliances / equipment has been successfully tested at _____ (barg) for _____ (hrs) and passed the final pressure test on _____ (date) in accordance to the requirements of:

Note: Please tick where applicable

- Code of Practice for Manufactured Gas Pipe Installation, Singapore Standard, CP 51:2004; or
- Other relevant code / standard : _____ (please specify for installation with operating pressure higher than 20 kPa)

2 I hereby declare that the Maximum Allowable Operating Pressure (MAOP) is _____ barg.

Signature and Stamp of PE / Date

Name: _____

PE No. : _____

CERTIFICATE OF FINAL PRESSURE TEST

PowerGas Ltd
c/o HOB (Gas Network Projects)
SP PowerGrid Ltd

Your Ref: _____

Through Shipper

Signature of Shipper Representative
Name / Designation

Name of Shipper

(Name of Project)

(Address of Premises / Development)

I, Designated Representative of the above project, hereby certify that the Gas Fitting from, but excluding, the GSIV up to, [and including / but excluding]*, the Meter Installation, has been successfully tested at _____ (barg) for _____ (hrs) and passed the final pressure test on _____ (date) in accordance to the requirements of:

Note: Please tick where applicable

- Code of Practice for Manufactured Gas Pipe Installation, Singapore Standard, CP 51:2004; or
- Other relevant code / standard : _____ (please specify for installation with operating pressure higher than 20 kPa)

2 I hereby declare that the Maximum Allowable Operating Pressure (MAOP) is _____ (barg).

Signature and Stamp of PE / Date

Name: _____

PE No. : _____

**Delete where applicable*

CERTIFICATE OF PROOF TEST

PowerGas Ltd
c/o HOB (Gas Network Projects)
SP PowerGrid Ltd

Your Ref: _____

Through Shipper

Signature of Shipper
Name / Designation

Name of Shipper

(Name of Project)

(Address of Premises / Development)

I, Designated Representative of the above project, hereby certify that the Consumer's Internal Pipe for the above project, from the Meter Installation outlet to the appliance / equipment has been successfully proof tested and passed the proof test¹ on _____ (date).

2 I further certify that the test pressure has been released and the Consumer's Internal Pipe is currently at atmospheric pressure. Accordingly, I hereby request to proceed with the connection and gas turn-on.

3 I shall undertake and proceed to purge and commission the Consumer's Internal Pipe immediately after the gas turn-on.

Signature and Stamp of PE / Date

Name: _____

PE No. : _____

¹ Proof test shall be conducted in accordance to the requirements of Singapore Standard CP51 for installation designed to operate below 20 kPa, otherwise, proof test shall be carried out at 100 kPa or the operating pressure, whichever is lower, for a period of 30 mins.

REQUEST FOR INTERIM GAS TURN-ON

I, Designated Representative of the above project, hereby certify that the Consumer's Internal Pipe for the above project from the Meter Installation outlet to the appliance / equipment has been prepared and is ready for purging and commissioning. Please proceed to turn-on gas for the purpose of purging and commissioning.

Signature and Stamp of PE / Date

Name: _____

PE No. : _____

CERTIFICATE OF PROOF TEST

PowerGas Ltd
c/o HOB (Gas Network Projects)
SP PowerGrid Ltd

Your Ref: _____

Through Shipper

Signature of Shipper
Name / Designation

Name of Shipper

(Name of Project)

(Address of Premises / Development)

I, Designated Representative of the above project, hereby certify that the Gas Fitting for the above project from, but excluding, the GSIV up to, [but excluding / and including]*, the Meter Installation have been successfully proof tested and passed the proof test¹ on _____ (date).

2 I further certify that the test pressure has been released and the said Gas Fitting is currently at atmospheric pressure. Accordingly, I hereby request to proceed with the connection and gas admittance.

3 I shall undertake and proceed to purge and commission the Gas Fitting from, but excluding, the GSIV up to [but excluding / and including]* the Meter Installation after the gas admittance.

Signature and Stamp of PE / Date

Name: _____

PE No. : _____

¹ Proof test shall be conducted in accordance to the requirements of Singapore Standard CP51 for installation designed to operate below 20 kPa, otherwise, proof test shall be carried out at 100 kPa or the operating pressure, whichever is lower, for a period of 30mins.

REQUEST FOR INTERIM ADMITTANCE OF GAS

I, Designated Representative of the above project, hereby certify that the Gas Installation for the above project from, but excluding, the GSIV up to and including the Meter Installation have been prepared and is ready for purging and commissioning. Please proceed to admit gas for the purpose of purging and commissioning.

Signature and Stamp of PE / Date

Name: _____

PE No. : _____



To: _____
(Name of Responsible Person)

For: _____
(Gas Installation Address)

STATEMENT OF INTERIM TURN-ON

Please be informed that, upon your certification of successful conduct of proof test and request for interim gas turn-on, the Gas Meter Control Valve was opened and gas was introduced into the Consumer's Internal Pipe for the purpose of purging and commissioning on _____ (date) at about _____ (time).

2 Please proceed to purge and commission the Consumer's Internal Pipe up to the appliance /equipment immediately.

3 Please notify us upon completion of the purging and commissioning. If we do not hear from you by _____ (date / time), we will terminate the gas supply to the Consumer's Internal Pipe and thereafter you are required to re-apply for gas turn-on in accordance to the requirements of the Gas Supply Regulations / Code.

Name & Designation:
SP PowerGrid Ltd
As agent for and on behalf of PowerGas Ltd

To: PowerGas Ltd
c/o SPPG representative

I hereby certify that the above Consumer's Internal Pipe has been successfully purged and commissioned.

2 I further certify that all end points of the Gas Installation/Gas Fitting have been affixed with warning labels marked "Live Gas. Do Not Tamper!" as stipulated in CP51:2004.

Signature and Stamp of PE / Date

Name : _____

PE No. : _____

To: _____
(Name of Applicant)

For: _____
(Gas Installation or gas fitting's Address)

STATEMENT OF TURN-ON

Upon your request, we turn-on supply of natural gas to the above Consumer's Internal Pipe on ____/____/____ at about ____ hrs at the nominal pressure of ____ barg.

2 The applicant and Designated Representative (DR) are required to notify all parties concerned, including but not limited to the responsible person, owner, developer, architect, engineer, main contractor and sub-contractors, suppliers, vendors etc. that gas has been introduced into the Consumer's Internal Pipe and to take all necessary precautions to prevent tampering and/or damage to the gas pipes.

3 The applicant and DR are to ensure compliance with all applicable legislation and codes of practice governing such gas installation or gas fitting including the latest version of the Gas Act (Cap 116A), the Gas (Supply) Regulations 2008 and the Gas Supply Code.

4 If you detect or suspect any gas leaks, please contact our 24-hours Customer Service Centre at telephone No. 1800-752-1800 immediately.

Name of SPPG Representative
SP PowerGrid Ltd
As Agent for and on behalf of PowerGas Ltd

Signature / Date

Acknowledged by:

Signature / Date

Name of Applicant: _____

Designation: _____

Company: _____

Signature and stamp / Date

Name of PE: _____

PE Registration No. : _____