



BHAGYANAGAR GAS LIMITED

(A Joint Venture of GAIL (India) Limited & HPCL)
Regd. Office: 2nd Floor, Parishrama Bhavan
APIDC Building, Basheerbagh, Hyderabad-04
Ph.: +91-40-66566986/66565093

For Office Use Only

Date of receipt of Registration:	
-------------------------------------	--

APPLICATION FORM FOR COMMERCIAL PIPED NATURAL GAS (PNG) CONNECTION (Please fill the form in Capital letters)

I/We wish to register for a Commercial Piped Natural Gas connection. Our particulars are given hereunder:

A. Consumer Details:

Name of Unit:	
Owner's Name:	
Detail of Company's Partner (s)/Director (s)/Proprietor:	
Name: Designation: Address:	
Name: Designation: Address:	
Unit's Address	Pin Code
Nearest Landmark:	
Contact Person Details: Name: Phone: _____; Mobile: _____; Email: _____	
PAN Number: _____; Sales Tax Reg. No: _____	

B. Business Details:

Business Type:			
<input type="checkbox"/> Hotel	<input type="checkbox"/> Restaurant	<input type="checkbox"/> Clinic	<input type="checkbox"/> Hospital
<input type="checkbox"/> Hostel	<input type="checkbox"/> Showroom	<input type="checkbox"/> School/College	<input type="checkbox"/> Cold Storage
<input type="checkbox"/> Office	<input type="checkbox"/> Consumer Care	<input type="checkbox"/> Banquet Hall	<input type="checkbox"/> Others (Pl Specify)
Present Fuel Used & Quantity Consumed per Month:			

C. Gas Usage Details:

Application of Natural Gas:
Authorized Signatory