## **Natural Gas Generator Installation Pre-Authorization Form**



Customer Information:							
Customer Name:							
Ameren Illinois Account N	lumber:						
Service Address:							
Meter Number:							
Email:							
Phone Number:							
Contractor Information:							
Company Name:				Contact Person:			
Phone Number:	_	_					
Email:							
Federal Identification Nur							
Payment Options Available: (Please indicate who will be responsible for billed charges.)				<b>Specific Appliance Information:</b> (Please indicate appliance load information below)			
Customer will pay for charges (Billed on Ameren account)	aes	Bill in one payn	nent	Quantity	Description	BTU/hr	
	<b>J</b>	☐ Bill in 12 month			Furnace(s) Water Heater		
					Stove/Oven		
Contractor will pay for cha	arges	Pay in advance			Dryer		
					Fireplace/Gas Log(s	s)	
Service Information:					Pool Heater		
Service illiorillation.					Pool/Hot Tub		
Requested Delivery Pressure:		PSIG / WC			Generator		
,					Other Total BTU Lo	ad	
					TOTAL DIO LO	du	
Customer must acknowledge	the follo	owina:					
Natural gas and electric servine municipality or city/county) i	vices mus	t be inspected and evalu					
Additional charges may incu	r after th	e inspection depending o	on existing condition	ns. Any charges w	ill be billed in advance of t	final installation.	
Natural gas service modifica Meter may be relocated.	tions cou	ıld include but are not lin	nited to: replaceme	nt of gas service, e	excess flow valve, gas reg	ulator, or gas meter.	
Electric service modification be relocated.	s could ir	nclude but are not limited	l to: replacement of	f meter socket or s	ervice entrance upgrade. I	Meter or entrance may	
If a second pressure regulate	or is need	led, it will be supplied ar	nd installed by the (	generator installer,	, plumber, or other qualifie	ed person(s).	
Custo	Customer Signature (Required)			Contractor Signature (Required)			
Date			Da	te .			