

Emergency Contact Form



As part of the network code, the relevant transporters require emergency contact details for all sites which consume over 25,000 therms (732,000kWh) of gas per annum. **It is your responsibility to provide this information.**

You can complete this form electronically. Simply type in boxes provided and save as a PDF. Alternatively you can print the blank form and complete by hand.

If you have multiple sites please request a multi-site emergency contact form.

Please return the form by email, post or fax to the Contract Negotiator responsible for your contract.

**IF THE CONTACT IS 24 HOURS PLEASE PROVIDE ONLY ONE.
IF THE CONTACT IS NOT 24 HOURS PLEASE PROVIDE THREE.**

Site Details

Site Reference

MPR Number

Contact 1

Title

Tel no.

Forename

Fax no.

Surname

E-mail

Job Title

Is this a 24-hour contact? Yes

No

Please provide details if Contact 1 is not available 24-hours

Title

Tel no.

Forename

Fax no.

Surname

E-mail

Job Title

Please provide details if Contact 1 is not available 24-hours

Title

Tel no.

Forename

Fax no.

Surname

E-mail

Job Title