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(Ap	icant's details – company name, address, REGON, NIP)
au	orised contact person:
no	ne and
	ame:
•	ne:
e-ı	ail:
	Gas Transmission System Operator GAZ-SYSTEM S.A. 02-337 Warszawa, ul. Mszczonowska 4
	APPLICATION ¹
Tro	he determination of the conditions of connection to a transmission network managed by Gassmission System Operator GAZ-SYSTEM S.A. ("TSO") for a Group C entity involved in the storage of eous fuel.
1.	Ve hereby apply for the connection to the transmission network managed by the Garansmission System Operator GAZ-SYSTEM S.A. for the storage facility named below:
	(name – type of storage facility)
	cated in:
	(address)
	hich will serve for the storage of gaseous fuel.
2.	Gaseous fuel: E /Lw ²
	(class, sub-class and designation according to PN-C-04750:2011 ÷ PN-C-04753:2011)
	application shall be completed in accordance with the instruction on the Company's website at

¹ The application shall be completed in accordance with the instruction on the Company's website at www.gaz-system.pl

² Delete as appropriate

3.	Selected from the catalogue of entry points and exit points posted on the ISO's website: www.gaz-system.pl							
	a) physical entry point(s) to the TSO's transmission system at which the fuel will be delivered for transmission to the storage facility:							
	b) physical exit point(s) from the TSO's transmission system at which the fuel will be off-taken from							
	the storage facility:							
4.	The expected starting date for the transmission of gaseous fuel to/from the storage facility:							
E								
Э.	Intended use of the gaseous fuel:							
	Working gas volume of the storage facility (m³):							

Capacity in a gas year:	connection year	first year after connection	second year after connectio n	third year after connection	fourth year after connection	Target tenth year after connection
- max. injection rate (m³/h)						
- min. injection rate (m³/h)						
- max. withdrawal rate (m³/h)						
- min. withdrawal rate (m³/h)						

8. Quantities of gaseous fuel to be off-taken from the TSO's transmission system for the needs of the storage facility³:

Off-take	by year:	connection year of	first year after connection	second year after connection	third year after connection	fourth year after connection	fifth year after connection
- max. annual	thousand m³/year						
- max. annoai	thousand kWh/year						
	thousand m³/year						
- min. annual	thousand kWh/year						

³ in the case of upgrading/expansion of an existing exit point, the currently off-taken capacities and quantities at the physical exit point referred to in 3(b) should be taken into account

!	hourly (m³/h)						
min.	hourly (m³/h)						4
contr	acted capacity (m³/h)						
contr	acted capacity (kWh/h)						
	8.1 For conversion from on the Gas Trans	mission	Operato		f Hs_{max} =		•
9.	Operating characteristic				T	T	
	by quarter of the gas year:		(1.10-31.12)	(1.0131.03) Q2	(1.0430.06) Q3	(1.07-30.09) Q4	
	% of yearly withdrawal volume from the storage facility	Q1		QZ	GO.	- Q-1	
	% of yearly injection volume the storage facility	e to					
	 maximum 11.2. during withdrav minimum maximum 11.3. during withdrav minimum maximum 	al of gas	seous fuel MPa, MPa. seous fuel MPa,			cility:	
11	.Does the Entity have th activity:	e licence	e (pre-app	oroved licence) adequate to	its main line o	f business
	- Yes/ No ⁵						
12	. Other information relevo	ni io ine		alion of the cor	inection conditi	ons:	

⁴ connection capacity⁵ delete as appropriate

14. With the Application, the fo	ollowing documents sho	all be attached:					
	national land surveyi	the basis of a current base map or an individual ng and cartographic resources, indicating the nected,					
attorney confirming the	b) current extract from the business register or the National Court Register (KRS) and a power o attorney confirming the power of the signatories of the Application to represent the Applicant unless such power results from the above-mentioned documents.						
c) Information clause							
NOTE: The Application form should be signed by the person(s) authorised to represent the Applicant in accordance with the current extract from the Register of Entrepreneurs (KRS) or a person holding a Power of Attorney, and bear their name stamp. If the application is signed by a person holding an appropriate power of attorney, please attach a document confirming the granting of such PoA.							
All copies of submitted documents should be certified as true to the original by a legal counsel, notary public or an authorised representative of the Applicant.							
place	date	signature(s) and stamp(s) of the Applicant(s)					