

PRIMARY SHIPPER CONFIRMATION - AMDQ TRANSFER/NOMINATION REQUEST

MARKET PARTICIPANT/PRIMARY SHIPPER INFORMATION		
Primary Shipper Details	Primary Shipper Name:	ABN:
	Postal Address:	
	Suburb:	State: Postcode:
Market Participant Details	Market Participant Name:	ABN:
	Postal Address:	
	Suburb:	State: Postcode:
FIRM CAPACITY RIGHTS/TITLE TO GAS INFORMATION		
System Withdrawal Point:		Interconnected Pipeline:
Date Range of the AMDQ Transfer/Nomination Request:		Firm Capacity/Title to Gas: (GJ/Day)
From Date: / / To Date: / /		
PRIMARY SHIPPER DECLARATION		
<p>By signing below, I confirm on behalf of the above-named Primary Shipper that:</p> <ol style="list-style-type: none"> In respect of the specified date range, the Primary Shipper has either: <ol style="list-style-type: none"> transferred Firm Capacity Rights to the Market Participant for not less than the specified capacity on the Interconnected Pipeline at the System Withdrawal Point; or contracted to acquire a quantity of gas that is not less than the specified capacity from the Market Participant at the System Withdrawal Point I have been duly authorised to sign this declaration on behalf of the Primary Shipper. 		
Contact Name:	Signature:	
Title:	Date: / /	

Email the completed form to: settlements@aemo.com.au