# **Request to Purchase Releasable Capacity**

|  |  |
| --- | --- |
| **Legal Name and DUNS:** |  |
| **Contact/Requestor Name and Phone:** |  |
| **Contact/Requestor Email:** |  |
| **Quantity (Dth/day) Requested:** |  |
| **Start Date:** |  |
| **End Date:** |  |
| **Receipt Location(s):** |  |
| **Delivery Location(s):** |  |
| **Other Terms and Conditions:** (e.g., Flow Path, if applicable, and reservation charge willing to pay) |  |