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| --- |
| .............................................,(Name of the System User) ..............................................(Company code and telephone) |
|  |

**RE-NOMINATION**

..........................201…

(submission date)

Acting in pursuance to Natural Gas Transmission Contract No ................ as of ..................20....we hereby submit our nomination.

The name of concerned party and identification code (entity code): ...................

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| --- | --- | --- |
| Day | Entry/Exit Point   | Nominated gas quantity, in kWh |
|
| *…….-……-201…*  | *……………… GMS Exit point* |  |
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|   |   |   |
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| System User's representative \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (signature) (position title and full name)  |

**The Nomination shall be submitted to AB Amber Grid:**

|  |
| --- |
| E-mail. nominations@ambergrid.lt**Contact in case of questions:**Tel. +370 5 236 01 23, +370 640 740 11 |
| **To be filled out by a representative of AB Amber Grid** |
| **CONFIRMATION** ...........................................201……. (date of the approval)representative of AB Amber Grid  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (signature) (position title and full name)  |