

Turbine meter testing service request (Canadian customers)



Company name		Address		Date (YYYY/MM/DD)
Main contact name		Telephone number	E-mail address	
Shipping contact name (<input type="checkbox"/> check if same as main contact)		Telephone number	E-mail address	
Billing address	City	Province	Postal code	
Meter owner company name and address (<input type="checkbox"/> check if same as billing address)	City	Province	Postal code	
Ship to address when meters completed (<input type="checkbox"/> check if same as billing address)	City	Province	Postal code	

Meter specifications		Service/test conditions (check all that apply)					
Meter badge number (<input type="checkbox"/> check if same as serial number)		Type	Pressure or Flow Rates %				
Meter make, model, & size		<input type="checkbox"/> 10 Point High Pressure (Reynolds Number)	<input type="checkbox"/> Pressure (test at maximum pressure) OR <input type="checkbox"/> Flow (test at maximum flow)				
		<input type="checkbox"/> 5 Point High Pressure (Reynolds Number standard)	<input type="checkbox"/> Pressure (test at maximum pressure) OR <input type="checkbox"/> Flow (test at maximum flow)				
Number of meters (for multiple meters/ types use additional quote form)	Serial number	<input type="checkbox"/> 5 Point High Pressure (Reynolds Number Standard) at 2 Pressures	Pressure 1		Pressure 2		
		<input type="checkbox"/> 2 Point Atmospheric	N/A	20%	N/A	N/A 95%	
Meter run provided with meter <input type="checkbox"/> No <input type="checkbox"/> Yes (provide sketch)		<input type="checkbox"/> Other (specify)					

In-test (additional cost)		Field operating conditions		Units		Max.	Min.
A test completed prior to repair and calibration to establish the performance of the meter in its current condition (Note: no "X" indicates not required)				<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/> Yes, 5 points at 10%, 20%, 50%, 75%, 95% +/- 5%		Flow	ACFH	M ³ /hr			
<input type="checkbox"/> Yes, 3 points at 20%, 50%, 95% +/- 5%		Pressure	PSIG	kPa			
<input type="checkbox"/> Yes, provide points: _____		Temperature	°F	°C			
Type of in-test required <input type="checkbox"/> Atmospheric in-test <input type="checkbox"/> High Pressure in-test							

Order/repair requirements	Gas composition	Mole %	If natural gas composition is not given, a NG composition at a molecular weight of 16.77 will be used to derive missing properties.
Seal meters (for custody transfer meters) <input type="checkbox"/> Yes, provide Measurement Canada Company Registration number: _____ <input type="checkbox"/> No, meter for informational purposes only	Methane (CH ₄)		
Paint meters (grey only) <input type="checkbox"/> Yes, no additional cost <input type="checkbox"/> No	Ethane (C ₂ H ₆)		
Repair details <input type="checkbox"/> New meter, no repairs needed. <input type="checkbox"/> In service meter, repairs required. <input type="checkbox"/> In service meter, no repairs required (explain below)	Propane (C ₃ H ₈)		
	Butane (C ₄ H ₁₀)		
	Carbon Dioxide (CO ₂)		
	Nitrogen (N ₂)		
	Other fluid (provide name)		

If applicable, add any details regarding repairs:

Additional information (please use separate sheet if needed)

All quotations, invoices and certificates will be returned by email.	
Turnaround <input type="checkbox"/> 6 - 8 weeks <input type="checkbox"/> 5 days (additional cost)	Required date (Yr/Mth/Day)

Shipping requirements	
Preferred shipping company (name/phone number)	Carrier account number (If applicable)

To submit your request, or if you have any questions, please contact:

FortisBC Measurement
Toll Free: 1-800-667-4338

Web: fortisbc.com/measurement
E-mail: measurement@fortisbc.com