



**DDQ/PDQ Change Request Form (EDDQI)**

DDQ & PDQ change request deadline ~ 1:15 PM.  
 Email to: [TSSsupport@natfuel.com](mailto:TSSsupport@natfuel.com) and [CzechowiczD@natfuel.com](mailto:CzechowiczD@natfuel.com)  
 If email is unavailable, fax to Transportation Services at (716) 857-7479

Business Party Name: \_\_\_\_\_

Gas Scheduler Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Today's date: \_\_\_\_\_

**-- DDQ Change --**  
*(Unshrunk Dth)*

Market pool:

Original DDQ:

Imbalance DDQ Offset\*:

DDQ modifier Qty:

Pstd DDQ (Total required):

Start date:

End date:

Reason required on all DDQ changes:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**--PDQ Change --**  
*(Shrunk Dth)*

Production pool:

Original PDQ per day:

PDQ Override Vol per day:

Start date:

Reason required on all PDQ changes:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Please fill in **ALL** boxes when requesting DDQ Change.  
 \* Imbalance DDQ Offset applies to MMNGS pools only.

Please fill in **ALL** boxes when requesting PDQ Change.

Attach spreadsheet if necessary.