**FUTURE BILLING METHODOLOGY**

UNLOCKING A LOW CARBON GAS FUTURE

CONSULTATION RESPONSE

|  |  |
| --- | --- |
| **Company name** |  |
| **Date** |  |
| **Contact name**  |  |
| **Job title** |  |

**Please e-mail your completed response document to** **david.chalmers2@nationalgrid.com** **and** **louisa.broad@nationalgrid.com****.**

# Consultation question responses

**For each of the questions below, please explain:-**

* **why you agree or disagree and;**
* **your views on what, if any, alternative changes you would consider to be appropriate.**

**Use as much space as required on the below tables.**

|  |  |
| --- | --- |
| **1.** | **Do you agree that the existing LDZ FWACV methodology presents a barrier to a low carbon gas future and that alternative methodologies should be explored?** |
| **Agree** |  | **Disagree** |  |
| **Please treat answer as confidential (delete as appropriate)** | **Yes/No** |
| **Reasoning**[ ] |
| **Indicative cost impact (if applicable)**[ ] |
| **2.** | **Do you agree that the Future Billing Methodology Project could provide the basis to deliver an economical and sustainable pathway to decarbonising heat for 2030 and 2050?** |
| **Agree** |  | **Disagree** |  |
| **Please treat answer as confidential (delete as appropriate)** | **Yes/No** |
| **Reasoning**[ ] |
| **Indicative cost impact (if applicable)**[ ] |

|  |  |
| --- | --- |
| **3.** | **Do you agree that the proposed Measurement and Validation Field Trials could provide an understanding of the modelled zones of influence of LDZ-embedded gas entry points?** |
| **Agree** |  | **Disagree** |  |
| **Please treat answer as confidential (delete as appropriate)** | **Yes/No** |
| **Reasoning**[ ] |
| **Indicative cost impact (if applicable)**[ ] |

|  |  |
| --- | --- |
| **4.** | **If your answer to Q2 and or Q3 was “Disagree”, what alternative or modified approach would you like to see considered?** |
| **Agree** |  | **Disagree** |  |
| **Please treat answer as confidential (delete as appropriate)** | **Yes/No** |
| **Response**[ ] |
| **Indicative cost impact (if applicable)**[ ] |

|  |  |
| --- | --- |
| **5.** | **What factors and impacts would you like to see considered through the Future Billing Methodology Project?** |
| **Please treat answer as confidential (delete as appropriate)** | **Yes/No** |
|  [ ] |

|  |  |
| --- | --- |
| **6.** | **If implemented, how would the suggested changes to the existing LDZ FWACV billing regime benefit your company/organisation, e.g. what savings would the changes bring?**  |
| **Please treat answer as confidential (delete as appropriate)** | **Yes/No** |
| **Reasoning**[ ] |
| **Indicative cost impact (if applicable)**[ ] |

|  |  |
| --- | --- |
| **7.** | **Do you envisage any legal or regulatory issues arising if any of the Future Billing Methodology options were to be implemented?** |
| **Please treat answer as confidential (delete as appropriate)** | **Yes/No** |
| **Reasoning**[ ] |
| **Indicative cost impact (if applicable)**[ ] |

|  |  |
| --- | --- |
| **8.** | **Do you have any other comments on the Future Billing Methodology Project? (e.g. issues not covered in this document)** |
| **Please treat answer as confidential (delete as appropriate)** | **Yes/No** |
| [ ] |