

DO NOT WRITE BELOW - OFFICE USE ONLY

Gas Inspection Report: <input type="checkbox"/> First Inspection <input type="checkbox"/> Re-inspection	Inspection: <input type="checkbox"/> Complete <input type="checkbox"/> Not Complete <input type="checkbox"/> Re-inspection required
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Tank Set Meter Set Service Distribution Line Residential Work 4 connections (if more than 4 describe): _____

Furnace Water Heater Range Space Heater Wall Heater Dryer Gas Fireplace Unit Heater Other: _____

Boiler Make Up Air Unit Mine Heater Unit Heater Motor Vehicle Conversions Temporary Installation Other _____

Commercial and Industrial work up to 117 kW (400,000 BTU) Other 117 kW (400,000 BTU), Describe: _____

COMMENTS: _____

No. of Deficiencies:	Installation Meets B149 Code: <input type="checkbox"/> Yes <input type="checkbox"/> No
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<p>IMPORTANT: Corrections noted on this report are necessary in order for the installation to meet the minimum requirements.</p>	<p align="center">_____</p> <p align="center">Gas Inspector Signature</p>	<p align="center">_____</p> <p align="center">Date</p>
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