



GAS SERVICE INSTALLATION RECORD

FOR NORTHEAST OHIO GAS USE ONLY

Date Received

Accepted

Denied

Notes:

Instructions:

Fill out the applicable sections of this form.

For a complete approved materials list and requirement details: Call 1-800-848-5589 or www.neogas.com

Customer Name			Service Line Installation Date		
Street Address			Lot Number		
City	State	Zip Code	County		
Building Type: Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Mobile Home <input type="checkbox"/>			Minimum Test Pressure		Service Line Depth
Customer Service Line(Curb to Meter)			YELLOW PE2406 - 1" to 1.25" <input type="checkbox"/> 120 psig for 10 minutes		This service line was installed with an approved tracer wire not in contact with the pipe and both installed to a minimum depth of 18 inches. INITIALS: _____
Material			YELLOW PE2406 - 2" to 6" <input type="checkbox"/> 120 psig for 30 minutes		
<input type="checkbox"/> Plastic	Depth _____ ft.	<input type="checkbox"/> 1/2"	BLACK PE3408 - 1" to 1.25" <input type="checkbox"/> 160 psig for 10 minutes		
<input type="checkbox"/> Steel	Length _____ ft.	<input type="checkbox"/> 1" <input type="checkbox"/> 1.25" <input type="checkbox"/> 2" <input type="checkbox"/> Other: _____	BLACK PE3408 - 2" to 6" <input type="checkbox"/> 160 psig for 30 minutes		
Test Gauge Calibration Date			Actual Test Pressure and Duration		
<p>***Service lines shall be installed with 3 ft. clearance from other lines using clean backfill (no rocks/sharp objects)</p> <p>***Service lines and risers are to be installed in the location pre-determined by Northeast Ohio Natural Gas.</p> <p>***OUPS must be contacted at least 48 hours prior to excavation at 1-800-362-2764.</p> <p>***Only APPROVED MATERIALS can be used in service line installations.</p> <p>***Approved materials include: Driscoplex,Performance,Charter Plastics,Flying W,ENDOT,Oil Creek or Central Plastics pipe 1"CTS PE 2406 .099 W ASTM D2513***Tracer wire 12 gauge solid copper with THHN or THWN coating***Perfection Servisert#71200 1"CTS .099W X 1" N.P.T. with 9"offset Perfection Bracket.</p>					
Installed and Tested By (Signature)			Date		
Date Qualified For Plastic Joining			Date Qualified For Service Line Installation		
Qualified By (Qualifying Agency, i.e. UTI)			OQ ID Number		
Drug & Alcohol Consortium Name					
Installing Company Name			Installing Company Address		
Contact Name			Phone Number		

By signing this form, the installer confirms that they installed the service line in accordance with applicable codes and standards. They also confirm that they were qualified under an approved Operator Qualification Program, in accordance with DOT requirements under 49 CFR 192, Subpart N. The installer is solely responsible for any work performed. If necessary, the installer also confirms they follow the drug and alcohol regulations of 49 CFR 199 which requires personnel be randomly tested for prohibited drugs and alcohol.

By Signing this form, the installer confirms they made the joint(s) on the service line according to qualification and training requirements listed below, as well as using Northeast Ohio Gas approved materials listed above and on the Customer Service Line Installation Policy.

- Qualification and Training includes:
1. knowledge of installation instructions for pipe joining
 2. developed skills through experience in pipe joining/installs
 3. able to perform previous joint installations, examined by a qualified installer for approval of the joints
 4. made joints described in number 3 within the last 12 months.

FAX TO:
NEO NATURAL GAS CORP (Strasburg Office)
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FAX TO:
NEO NATURAL GAS CORP (Lancaster Office)
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