NORTHEAST OHIO Natural Gas Corp.

Phone 800-848-5589

GAS SERVICE INSTALLATION RECORD

For Company 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 1-800-832-6164.

Customer Name			**Service Line Installation Date**	
Street Address			**Lot Number**	
City	**State**	**Zip Code**	**County**	
Building Type: Residential ☐ Commercial ☐ Mobile Home ☐			YELLOW PE2406 - 1" to 1.25" ☐ 120psig/10min. YELLOW PE2406 - 2" to 6" ☐ 120psig/30min. BLACK PE3408 - 1" to 1.25" ☐ 160psig/10min. BLACK PE3408 - 2" to 6" ☐ 160psig/30min.	**Service Line Depth** 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:** _____
Customer Service Line(Curb to Meter) **Material** ☐ Plastic Depth _____ ft. ☐ Steel Length _____ ft.			**Size** ☐ 1/2" ☐ 1" ☐ 1.25" ☐ 2" ☐ Other: ___	
TAX ID NUMBER				

***Service lines shall be installed with 3 ft. clearance from other lines using clean backfill (no rocks/sharp objects) ***Service lines and risers are to be installed in the location pre-determined by Orwell Natural Gas or Northeast Ohio Natural Gas.
***OUPS must be contacted at least 48 hours prior to excavation at 1-800-362-2764.
***Only APPROVED MATERIALS can be used in service line installations.
Approved materials include: Driscoplex,Performance,Charter Plastics,Flying W,ENDOT,Oil Creek or Central Plastics pipe 1"CTS PE 2406 .099 W ASTM D2513Tracer wire 12 gauge solid copper with THHN or THWN coating***Perfection Servisert#71200 1"CTS .099W X 1" N.P.T. with 6" or 9"offset Perfection Bracket.

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 Orwell Natural Gas/Northeast Ohio Natural 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.