



GAS SIZING INSTALLATION PLAN

Date: _____ Permit #: _____

Installers Company: _____ Phone #: _____

License #: _____

Owner/Builder: _____

Project Address: _____

Subdivision: _____ Lot #: _____ Phase: _____

Fuel line sized for: ___ 4 oz. Or ___ 2 lb. Delivery Pressure

Multiple Meter: **yes no** if yes: are the fuel lines tagged: **yes no**

FOR INSPECTIONS CALL: (435)879-5313

FAX (435)879-5298

I hereby certify that the entire mechanical fuel-line system for the structure located at the address listed above has been sized and pressure tested in accordance with the International Mechanical Code currently adopted by the State of Utah.

Installers Signature: _____

Approved by: _____

Building Inspector

Date

Total Length: _____

Total C.F.H.: _____

Test Pressure: _____