



UTILITY PIPELINE

P. O. Box 35519
Canton, OH 44735

Phone: 1-888-863-0032
Fax: 330-498-9137

House Line Pressure Test Form

→ **Original Form Must Be Completed and Returned Before Service Will Be Turned On.** ←

PLEASE PRINT

Customer Information

Customer Name: _____

Address: _____

Municipality: _____ County: _____ Zip: _____

Type of Building: Residential-Single Residential-Multi-family Commercial Mobile Home

Number of Meters Required: Meter Size Required:

Type of Installation: New Renewed Repaired

House Line (Exposed—After Meter)

Test Pressure/Duration: _____ PSIG _____ Mins.
(Min. 3 PSIG: 15 min)

Installed and Tested By: _____ Date: _____
Signature

Installing Firm: _____ Contact Person: _____

Address: _____ Phone Number: _____

Above Installer (s) Warrants that All Materials and Installations Comply with National Fuel Code Installation Standards

UPL Remarks: _____

Revised 2/22/12

This form is to be filled out by your plumber or HVAC contractor