

## TRUMBULL COUNTY BUILDING INSPECTION

159 EAST MARKET STREET, SUITE 100 WARREN, OHIO 44481 Phone: 330-675-2467

Fax: 330-675-2862

## HOUSE FUEL GAS LINE PRESSURE TEST FORM

	CUSTOME	<u>-R INFORMATION</u>		
Name:				
Address:				
Municipality:	County:		Zip:	
Type of Building:	<ul><li>□ Residential/Single</li><li>□ Commercial</li><li>□ Mobile Home</li></ul>	Type of Installation:	□ New □ Renewed □ Repaired	
	HOUSE LINE (Exposed	d Above Grade After Me	eter <u>)</u>	
Test Pressure PSIG	:	Duration/Mi	Duration/Min	
Installed and Test	ed By:	Date:	Date:	
Installing Firm/Contractor:		Permit#		
Contact Person: _				
Address:		Phone #		
Witness:				
Remarks:				

Note: Test pressure shall be not less than 1.5 times the proposed maximum working pressure but not less than 3 psig irrespective of design pressure. When test pressure exceeds 125 psig, the test pressure shall not exceed a value that produces a hoop stress in the piping greater that 50% of the specified minimum yield strength of the pipe installation shall comply with the ICC International Fuel Gas Code installation standards. Please return the completed form to the Trumbull County Building Department, 347 North Park Ave, Warren, OH 44481 prior to the final heating inspection request. Failure to return the form may hold up issuance of the Certificate of Occupancy. Please call 330-675-2469 if questions and thank you for your cooperation.