

South Ogden City

Fuel Gas Clearance Report

Date: ____/____/____
Mo. Day Year

Address: _____ City: _____

Subdivision: _____ Lot / Unit #: _____

FUEL LINE SIZE: _____ TOTAL LOAD IN BTU'S: _____
PRESSURE: 2lb. _____ 4oz. _____ OTHER: _____
PERMIT # _____

CONTRACTOR INFORMATION:

General Contractor: _____
Business Phone: (____) _____

Mechanical Contractor: _____
Business Phone: (____) _____

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 applicable codes currently adopted by the State of Utah.

(Printed Name of Certifying Individual)

(Original Signature of Certifying Individual)

Date: ____/____/____
Mo. Day Year

Note: Only agencies/individuals pre-approved by South Ogden City shall be recognized to certify the sizing and pressure testing of any residential or commercial mechanical fuel-line system located within South Ogden City limits.

CLEARANCE WILL BE REJECTED FOR FAILURE TO COMPLETE ANY OF THE INFORMATION REQUESTED ABOVE

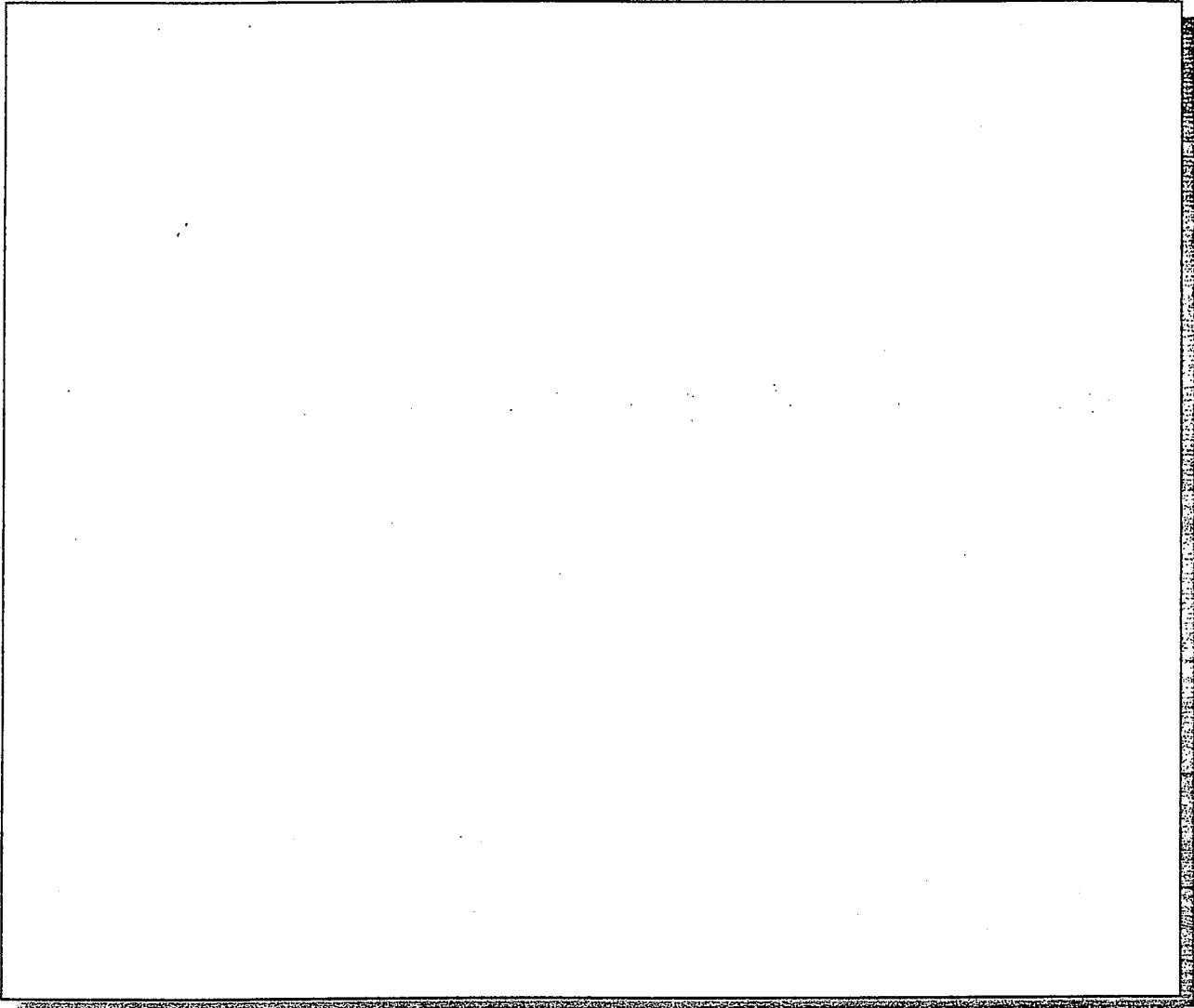
SECTION BELOW TO BE COMPLETED BY BUILDING INSPECTOR ONLY

METER INSTALLATION: APPROVED _____ DENIED _____

(Building Inspector Signature)

Date: ____/____/____
Mo. Day Year

Gas Line Sizing (Diagram)



Lot: _____

Subdivision: _____

Meter Size: _____

Deration Factor = Rated BTU Input: _____

Appliance A= _____ CFH
Appliance B= _____ CFH
Appliance C= _____ CFH
Appliance D= _____ CFH
Appliance E= _____ CFH
Appliance F= _____ CFH
Appliance G= _____ CFH

Total Demand _____ CFH

Length of pipe to most remote outlet _____ (Include Risers & Drops)

Any changes or modifications shall be brought to the attention of the Building Official.