



Service Installation Record

Instructions: Complete this form and fax it to 1-888-846-3259. If gas is required for the first time for this location, please call 1-888-280-2938 between 8:00 am and 4:30 pm Monday - Friday to determine if gas is available.

PNG USE ONLY			
Date Received	Project Number	Investment No	Tap No

NOTE: For NEW service line installations, this form will not be accepted until AFTER an application has been submitted by the responsible party and received and approved by Peoples Natural Gas.

Development/Project Name (Type or Print)		Date Service Line Installed	
Customer Name		Contact Name & Phone Number for Tie In	
Street Address		Lot Number	
City	State	Zip	Municipality
Building Type <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Mobile Home		Installation Type <input type="checkbox"/> New <input type="checkbox"/> Renewed <input type="checkbox"/> Repaired <input type="checkbox"/> Misc**	
**Misc Activity <input type="checkbox"/> Manifold Repair Only		<input type="checkbox"/> Manifold Painted <input type="checkbox"/> Other	
Meter Riser Type	Meter Riser Manufacturer	Meter Riser Size	

Customer Service Line (Curb to Meter)- Check All that Apply		
Material <input type="checkbox"/> Plastic <input type="checkbox"/> Steel	Size <input type="checkbox"/> 1/2" <input type="checkbox"/> 1-1/4" <input type="checkbox"/> 1" <input type="checkbox"/> 2" <input type="checkbox"/> Other _____	Minimum Test Pressure Indicate the type of test performed by checking the appropriate box: <input type="checkbox"/> 90 psig for 10 min <input type="checkbox"/> 150 psig for 10 min <input type="checkbox"/> 90 psig for 1 hour*** <input type="checkbox"/> 150 psig for 1 hour*** ***required for pipe diameter 2" and larger
<input type="checkbox"/> Direct Burial- Tracer Wire (Y / N) <input type="checkbox"/> Insert	Service Depth	
<input type="checkbox"/> Low Pressure System (Ounces) <input type="checkbox"/> Regulated Pressure System	Service Length	

Installing Firm			
Firm Name			
Address		City	State Zip
Contact Name (Type or Print)		Phone Number	

Note: By signing this form, the installer attests that they installed or repaired and tested the service line and/or meter in accordance with applicable codes and standards including, but not limited to:

INSTALLATION

- | | |
|---|--|
| <ol style="list-style-type: none"> Material used in this installation meet Peoples Natural Gas' approved standards 12 gauge yellow thermoplastic tracer wire was installed on direct burial plastic Tracer wire was properly installed and checked for continuity across its entire length Service line is installed at a minimum depth of 12 inches or encased New service is not run under steps, porches or crawl spaces Meter manifold installed does not block a fire escape Meter manifold is properly supported | <ol style="list-style-type: none"> Meter manifold is protected from vehicular damage Meter manifold is not closer than 3 feet from an ignition source Meter manifold service line is properly supported Meter is accessible and as perpendicular to the main as possible New meter manifold valve installed Service must be run to the street to which the structure is addressed, unless given permission by Peoples Natural Gas All exposed piping must be suitably coated to prevent corrosion |
|---|--|

INSTALLER

- He/She is Operator Qualified in accordance with the requirement set forth in 49 CFR 192, Subpart N. This means that the installer has been evaluated by a Peoples Natural Gas approved third party qualifier and has been deemed qualified to perform the various covered tasks associated with installation of natural gas service lines. (3 year re-qualification required)
- He/She has been evaluated and qualified by a Peoples Natural Gas approved third party qualifier to join plastic pipe utilizing mechanical couplings. (1 year re-qualification required)
- His/Her employer administers a Drug & Alcohol Testing Program that meets the requirements of 49 CFR 199, including random testing.

The installer understands and agrees that by performing the inspection herein and accepting this form and stated qualifications of the installer, Peoples Natural Gas is not assuming nor accepting any responsibility or liability for the installation or repair work performed by the installer and that the installer remains solely responsible for any work performed. Further, installer agrees to indemnify, hold harmless, and, if requested, defend Peoples Natural Gas, its officers, employees and agents from and against any and all liabilities, costs, claims, demands, fines, penalties, suits (including cost of defense), proceedings, actions, and causes of actions, including reasonable attorney's fees arising out of, or associated with, or related to the installation described herein.

Installed and Tested by (Must be Legible)	Signature	Date
Qualified By (Name of Qualifying Agency)		QO ID Number