WASATCH COUNTY BUILDING DEPARTMENT
FUEL GAS INSTALLATION FORM

Address: ___________________________________________

PERMIT #: _______________________

Lot/Unit#: _______________________

Subdivision: _______________________

Longest Line Length: ________________

CONTRACTOR INFORMATION

Builder’s Name: ___________________________________

Gen. Contractor ( ) Owner/Builder ( )

Business Phone: ____________________________      License # _______________________

Mechanical Contractor: ____________________________

Business Phone: ____________________________      License # _______________________

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.

# of Units    List of Equipment/Appliances:

_       Furnace(s) ___________ BTU’s

_       Water Heater(s) ___________ BTU’s

_       Dryer(s) ___________ BTU’s

_       Barbeque(s) ___________ BTU’s

_       Range/Cook Tops ___________ BTU’s

_       Boiler(s) ___________ BTU’s

_       Fireplace(s) ___________ BTU’s

Other Equipment, Specify:

_       ___________ ___________ BTU’s

_       ___________ ___________ BTU’s

_       ___________ ___________ BTU’s

TOTAL: ___________________

Elevation/Deration Factor: ___________

NATURAL GAS ______     LPG ______

FUEL INLET (PIPE) SIZE: _______________________

PIPE TYPE: ____________________________

SYSTEM OPERATING PRESSURE:

2 LBS ______     4 OZ ______

OTHER: _______________________________

FUEL INLET SIZE: ____________________

SYSTEM OPERATING PRESSURE:

2 LBS ______     4 OZ ______

OTHER: _______________________________

ONCE: _______________________

MUST HAVE ATTACHED SCHEMATIC DRAWING