

GAS DISTRIBUTION INSPECTION AND LEAKAGE REPAIR

Name of Complex: _____ **Grade of Leak Case**
ADDRESS: _____ **Grade I** _____
 _____ **Grade II** _____
 _____ **Grade III** _____

SKETCH SHOWING LEAKS LOCATED

METER SET

<p>Use back of page if more space is needed.</p>	<p>Meter No. _____ (if inspected)</p>
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LEAK DATA

Detected By	Collecting	Probable Source	C.G.I. Test
Mobile Flame Pack	In Building	Mainline	Gas Percent (%)
Flame Pack	Near Building	Service Line	L.E.L.
Visual/Vegetation	In Manhole	Service Tap	P.P.M.
Combustible Meter	In Soil	Valve	Negative
Odor	In Air	Meter Set	
Bar Hole	Other	Tee	

Pressure	Surface	Leak Course
Low	Lawn	Corrosion
Intermediate	Soil	Outside Force
High	Paved	Construction Defect
	Other	Material Failure
		Other

Component	Explanation	Part of System	Pipe Type	Size	Year Installed
Pipe		Main	Steel		
Valve		Service	Cast Iron		
Fitting		Meter Set	Plastic		
Drip		Customer Piping	Other		
Drip Connection		Other			
Regulator					
Other					

Pipe Condition: Good: _____ Fair: _____ Poor: _____

Coating Condition: Good: _____ Fair: _____ Poor: _____

Date Repaired: _____ Date Rechecked: _____

Remarks:
