

Natural Fuel Gas  
Meter Clearance Report

Revised 7/11/02

Date: \_\_\_/\_\_\_/\_\_\_  
Month/Day/Year

Address: \_\_\_\_\_  
(Street Address) (City)

Subdivision: \_\_\_\_\_ Lot/Unit # \_\_\_\_\_

General Contractor or Owner/Builder: \_\_\_\_\_

FUEL LINE SIZE: \_\_\_ LOAD (BTU/CFH): \_\_\_\_\_  
PRESSURE: 2LBS. \_\_\_ 4OZ. \_\_\_ OTHER: \_\_\_\_\_  
PERMIT # \_\_\_\_\_

Comments: \_\_\_\_\_

General Contractor Daytime Phone: (\_\_\_) \_\_\_\_\_

Mechanical Contractor: \_\_\_\_\_

Mechanical Contractor Daytime 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 International Mechanical Code currently adopted by the State of Utah.

\_\_\_\_\_  
(Printed Name of Certifying Individual)

\_\_\_\_\_  
(Signature of Certifying Individual)

Date: \_\_\_/\_\_\_/\_\_\_  
month day year

\_\_\_\_\_  
(Employer of Certifying Individual)

Business Phone: (\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City) (State) (Zip)

*Note: Only pre-approved agencies/individuals shall be recognized to certify the sizing and pressure testing of any residential or commercial mechanical fuel-line system. The agency/individual shall be pre-approved by the local administrative authority in which the structure is located.*

METER INSTALLATION: APPROVED \_\_\_\_\_ DENIED \_\_\_\_\_

\_\_\_\_\_  
(Building Inspector/Official) Date: \_\_\_/\_\_\_/\_\_\_  
month/ day year