

PROPANE SYSTEM SAFETY CHECK FOR RESIDENTIAL CUSTOMERS

ACCOUNT NUMBER: _____
 NAME: _____
 ADDRESS: _____

TELEPHONE OFFICE: _____ - _____ - _____
 HOME: _____ - _____ - _____
 CELL: _____ - _____ - _____

Company Name: _____
 HVAC Certified Tech: _____

 Call Date: _____ Date Requested: _____
 Instructions: _____

Appliance Check Item	Central Heating 1	Space Heater 2	Water Heater 3	Range 4	Clothes Dryer 5
Manufacturer					
Model #					
Serial #					
Location					
BTU				N/A	N/A
Age					
Manual Shut off (installed/existing)					
Venting					

Tank /Cylinder

Size	Serial #	MFR.	MFR Date	Last Test Date	Location	Tank Cond.	Paint	Pigtail	Fittings	Gauge	Relief Valve	Fittings Leak Test
						Cond.					Cond.	
						Date					Date	
						Cap					Cap	

Piping/Regulator Operating/Condition

Single Stage	Material	Piping Size	Regulator Date Code	Regulator Condition	MFR.	Model	Reg Vent Position	How Protected	Flow Pressure
									IN. WC
Two Stage	1st								PSIG
	2nd								IN. WC

System Leak Test

	Start Pressure	End Pressure	Time Held	System Okay
Single Stage	(Inches W.C.)	(Inches W.C.)		
Two Stage	1st (PSIG)	(PSIG)		
	2nd (Inches W.C.)	(Inches W.C.)		

Comments: _____

This inspection covers (Propane LP-gas) items & equipment visible & accessible to the service technician & represents the conditions existing on the date of inspection. It does not cover latent or manufacturing defects, the internal working of sealed equipment, or structural components, & cannot be construed to cover future defects or unforeseen happenings.

I, _____
 (Please Print)

- Know how to turn off gas in case of emergency
- Have smelled propane & can detect it's odor.
- Have received the Consumer Safety Information.
- Had gas system deficiencies and/or corrections, if any, clearly explained to me.
- Am satisfied with the service work performed.

Reference Invoice #: _____ Date: _____

I, _____
 (Please Print)

Certify that I have completed the System Check as prescribed.

Performed odor test Y N Performed Pressure Test Y N
 Left customer safety info. Y N

Customer's Signature

HVAC Certified Delivery Man/Technician Signature

