TEXAS SCHOOL FACILITIES

GAS PIPE TESTING FORM

SCHOOL ADMINIC				
SCHOOL ADMINIS	SIKATION ADDI	XESS/LUCATION:		
PHONE NUMBER: ()		DA1	DATE:	
SCHOOL DISTRIC	T REPRESENTA	TIVE SIGNATURE	:	
POSITION:				
NUMBER OF SEPAR	RATE FACILITIES	(METERS) IN THIS	DISTRICT:	
FACILITY NAME	TEST DATE	TEST RESULT (Pass/Fail)	Acct. or Meter No.	
Example: ABC Elementary *	08/01/97	Pass	12-3-4567-8910-1 or 411382	

* For each facility listed a Gas Pipe Test Results Form (PS-86B) must also be completed.

Railroad Commission of Texas Pipeline Safety H FORM PS-86A

Texas School Facilities

Gas Pipe Testing Form Continuation Page

FACILITY NAME	TEST DATE	TEST RESULT (Pass/Fail)	Acct. or Meter No.

Railroad Commission of Texas Pipeline Safety H FORM PS-86A

Page _____ of _____

Clear Form