



GASCheck - Gas System Check

421134

Account Number 29082 Invoice Number _____ Date 6/18/21
 Name Lloyd M Hedgepeth Company/Branch Diversified / Dum
 Address 132 Bunker RD Call Taken By _____
 City Littleton State NC Zip 27546 Telephone (Work) _____ (Home) _____

Container Check

Size	Serial #	Manufacturer	Requalification Date (Cylinders Only)	Location	Container Condition	Relief Valve	Fittings Leak Check
250	E22351-Ch	Charlotte		Box	good	out	out

Pressure Test (If Applicable)

Start Pressure	End Pressure	Time Held	Pressure Held	Work Order
70	70	10	<input checked="" type="radio"/> Y	<input checked="" type="radio"/> N
				<input type="radio"/> Y
				<input type="radio"/> N

Piping Check

Materials	Size	Cover/Protection
plastic	1/2"	UGS

System Leak Check

Start Pressure	End Pressure	Time Held	Pressure Held	Work Order
70	70	10	<input checked="" type="radio"/> Y	<input checked="" type="radio"/> N
				<input type="radio"/> Y
				<input type="radio"/> N

Regulator Check

Type	Manufacturer	Date/Model	Vent Position/Protection	Flow Pressure	Lock-Up Pressure
First Stage	MEC	23 Sep 21	yes	12	
Second Stage	MEC	09 Oct 19	yes	7	15

Item(s) Taken Out Of Service Plus All Comments

Safety Information Supplied: _____

Comments: Please note all repairs and corrections made along with any recommended actions.

