



Community Development

## Washington County Gas Sizing Installation Plan

Installation Co.: \_\_\_\_\_

Phone: \_\_\_\_\_ License #: \_\_\_\_\_ Permit #: \_\_\_\_\_

Project Address: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_ Permit #: \_\_\_\_\_

Gas Line Sized For: \_\_\_\_\_ 4 oz \_\_\_\_\_ 2 lb. Delivery Pressure BTU/Cubic Ft: \_\_\_\_\_

Total Length: \_\_\_\_\_ Total C. F. H.: \_\_\_\_\_ Date of Inspection: \_\_\_\_\_

Inspector: \_\_\_\_\_