

NATURAL GAS

SERVICE COMPLETION NOTIFICATION

Permit No			Location		DIK	T Idii		
Permit Issurer				Qtr	Sec	Twp	Rge	Mer
Installation name								
Address								
Contractor / Instal	ler							
Name								
Address					_			
					_			
Phone					_			
	ne piping system he with the Safety C n is ready for gas	odes Act & Regu	lations and CSA I	B149.1 an	d			
Please enter number of	annliances and tot	al innut RTI I rating	for each of the follo	owina				
House Furnace(s)	Water heater	BBQ	Firepla			Range		
Dryer	Garage	Other	Other	-		Other		
	<u> </u>							
Air Test: Dui	ration		PSI		_			
Gas Service Is	Connected to Mete	r yes		No			_	
							-	
Signature								
Print Name	_				=			
Gas Fitter Cer	tificate No.				_			
Date	_							
Dute	-							

This form is to be completed and faxed or e-mailed to the Permit Issuer and the Gas Supplier before the gas service will be unlocked.