

MTCH SCHED 3-14
72116

EX 2
4/26/08
10:45 AM

6363 Waterman

SPECIAL METER TEST
LACLEDE GAS COMPANY

Customer Name Teresita Fujii
Customer Address 6363 Waterman Ave Zip Code 63130
Customer Account Number 376909-002-8 Grid 13616
Reason for Test HIGH BILL
Meter Number 1324914 ✓ Meter Size 250 AM
Ordered By 50045 Date _____

Meter Reading 0450 ✓ Reg. ☒ B.P.I. ☐ Press. Comp. ☐
Remote Index - M.E. ☐ R.I. ☐ R.E. ☐ Outside Reading _____
Metering Pressure Low Pr Cell No. ☒ 0450
Removed By Stone Date 3-14-07

Record of Test at 50 C.F.H. 99.5 % Fast ☒ Slow ☐ Exact ☐
Record of Test at 250 C.F.H. 99.1 % Fast ☒ Slow ☐ Exact ☐
General Condition and Appearance of Meter GOOD

Was Index Properly Sealed? Yes ☒ No ☐
Prover Number 1574 Tested By SAPIENZA Date 4-26-07

Supervisor's Report and Findings: Found Reading OK 112 x 2
Am. R. OTTO (5353) 4-26-07

Meter tested within standards
Meter Dept. Supervisor Signature E. Manafy Date 4/30/07
Superintendent Approval Frank J. Kelly Date 5-17-07

Customer Notified of Test Results

By _____ Date _____

W.O. 37215 W.D. 3-19-07

ACCT NO 376909-002-8 RATE 2RL STAT ACTIVE ON DATE 09/06 PAGE 1
NAME FUJII,TERESITA TOWN 550 ROUTE 1474 RMKI
SERV ADD 6363 WATERMAN AVE 01/10/08
CITY/ST ST LOUIS,MO BALANCE 1,247.41 CIS ACTIVITY NONE
ZIP CODE 63130 GRID 13616D CYCLE 11

***** SERVICE ORDER HISTORY *****
CONTROL DATE TIME DESCRIPTION ST SVMAN COMPLETE POSTED INDEX TEN
070154125 03/20/07 0708 DISC - NO PAYM X 99999 00/00/00 03/22/07 00000 002
COMMENTS (U) RE-ROUTED
070146746 03/15/07 1932 GAS ODOR C 07667 03/14/07 03/19/07 00450 002
COMMENTS () X0450,712 ISSD
070123125 02/26/07 1101 METER CHANGE C 07667 03/14/07 03/16/07 09655 002
COMMENTS () LIT R,WH,HH
070112661 02/26/07 1101 METER CHANGE F 00045 03/06/07 03/07/07 00000 002
COMMENTS () RESHCH3-6 TO 3-14,NEED CUBE VAN&2TECH1HRJOB.
070105820 02/26/07 1101 METER CHANGE F 99999 02/28/07 03/01/07 00000 002
COMMENTS () RESCHED PER CUST;MISSED APPT;00565
070078840 01/18/07 1404 METER CHANGE X 99999 00/00/00 02/20/07 00000 002
COMMENTS () CANCELLED PER CUST RQST0070
070045394 01/18/07 1404 METER CHANGE F 99999 02/06/07 02/12/07 00000 002
COMMENTS () RESCHED PER CUST THRU BP-0501
070034797 01/18/07 1404 METER CHANGE F 99999 01/23/07 01/25/07 00000 002
COMMENTS () REQD2RESCHD BY LAC-DID HAVE MTR;RESCHD 2-6-07 AM;SF 0063
ENTER TRANSACTION CODE OR PAGING REQUEST-

ACCT NO 376909-002-8 RATE 2RL STAT ACTIVE ON DATE 09/06 PAGE 11
NAME FUJII,TERESITA TOWN 550 ROUTE 1474 RMKI
SERV ADD 6363 WATERMAN AVE 01/10/08
CITY/ST ST LOUIS,MO BALANCE 1,247.41 CIS ACTIVITY NONE
ZIP CODE 63130 GRID 13616D CYCLE 11

***** REMARKS INFORMATION *****

DATE	TIME	OPER	SEGMENT	TYPE OF REMARK	ACTIVITY CODE
------	------	------	---------	----------------	---------------

02/26/07	16:18	08889	CUSTOMER	CREDIT	
----------	-------	-------	----------	--------	--

REMARK HOLD COLL - MS TO PAY \$100 BY 3/13/06, BILL N DISPUTE-BP

02/26/07	11:46	08889	CUSTOMER	SATISFIED	25 CALL BACK
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REMARK LFT MESSAGE ON MACHINE - BP

02/16/07	08:31	00070	CUSTOMER	INFORMATIVE	
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REMARK 2)HAS BEEN NOTIFIED

02/16/07	08:31	00070	CUSTOMER	INFORMATIVE	
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REMARK CANCLLD MTR CHNG SCHED 2/16/6 AM PER MS FUJI RQST-SRVMN

02/13/07	16:17	08889	CUSTOMER	CREDIT	
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REMARK HOLD COLL - BILL IN DISPUTE - BP

DEPRESS PF9 TO RETURN TO THE REMARK MENU SCREEN

ENTER TRANSACTION CODE OR PAGING REQUEST-

ROUTES FOR **2/16/2007**

Search **SERVICE ADDRESS** **6363 WATERMAN AVE**

SERVICE INFORMATION

ADDRESS	ZIP	DISTRICT	METER SIZE
6363 WATERMAN AVE	13616	S	4 250AM

ORDER INFORMATION

ORDER	JOB TYPE	TRANSACTION	LOCATION	TIME
070078840	MTRS	METER CHANGE		12

ACCOUNT	DISPATCHER NAME	TIME SCHEDULE	REMARKS
376909 002	FUJII, TERESITA	AM	NO

SPECIAL INSTRUCTIONS

AM-AFTER 8:30 AM;PLS.CALL 20 MIN B4 314-579-9223;
 INSTALL MTR SIZE 425;MTR TEST PAPERS 2 GIBSON Y
 () RESCHED PER CUST THRU BP-0501

ROUTE INFORMATION

ROUTE	SEQUENCE	ROUTE INFO
117	1	CENTRAL 2

VIEW ROUTE VIEW ROUTE ASSIGNMENT VIEW MAP

copy of route archive

REVIEW ORDER REASON

2563

376909-002
(F)ield (R)outed R (D)ispatched:
Grid No. 13616D
Date Scheduled 01/23/07
AM X PM AL

Office Located LACLEDE
Order No. 070034797 Dist. S Area 04
Account No. 376909-002
Meter No. 001324914
Meter Size 250AM Loc. AR-INSIDE

SERVICE INFORMATION: Tee 24 EWHL Main 05 SNCL
Curb Box 03 NNCL Riser 00 Service 24 EWHL
Material COPPER Branch Service N

Leak Information NO MATCH FOUND
Leak # Class
Location
Detected Gas:
Source of Gas:

REQUIRED INSPECTIONS:

SPECIAL S.E.I.

Name FUJII, TERESITA
Service Address 6363 WATERMAN AVE Cust Phone 314-579-9223
Township ST LOUIS, MO 63130 Owner/Tenant OWNER
Special Inst: AM, AFTER 8:30 AM PLS, CALL 20 MIN B4 314-579-9223
Special Inst: INSTALL MTR SIZE 425.MTR TEST PAPERS 2 GIBSON Y

JOB DESCR. MTRS 04 *** METER SERVICE ORDER *** MTR STAT ACTIVE
METER CHANGE

TAKEN 07/25/06 NEW AMR ON THIS METER
TAKEN 04/18/91 BASEMENT

LAST COMPLETED ORDER TOFF/TONN 09/19/06 99999 TENANT=002
COMMENT () AMR METER RBIL TONN FROM 8/16 X8748 EMP#0326/GMW
Ordered By MRS FUJII

OFFICE USE ONLY: Date Taken 01/18/07 Time Taken 14.04.58 Operator 00593 HOLLAND, DANIELLE
Mailing Address City ST ZIP
Meter Sets: Town Code 550-ST LOUIS Route 1474
Rate 2RL Revenue Class 001 Norm 9153 Add 3473 Tax Code T
SVC Press LOW Geographic Location

() CHECK IF EXTRA FIELD WORK DONE. SEE REVERSE FOR COMPLETED INFORMATION

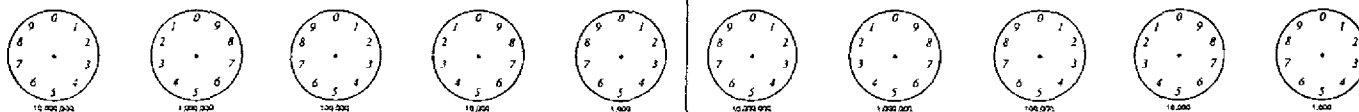
Main Meter 001324914 COMPLETION INFORMATION

Old Meter No. 001324914 New Meter No.
Device Number 001324914 Device Number
No. of Dials: 4 No. of Dials: MTR-TEE:
Location: AR-INSIDE Size: 250AM Location: Size:

D.R. METER Meter Found DR Not DR
REPORT Device Found DR Not DR

CURRENT METER READING:

NEW METER READING:



READINGS ==> 9132D LAST READ DATE 12/19/06

INDEX READING

Mult

INDEX READING

Mult

Top/Front/Meter /

Bot/Rear/Device /

Veeder /

HIGH/LOW READINGS FROM SYSTEM: Low 9247 High 9324 Verified

ORDER STATUS F EMPLOYEE NUMBER 6575 DATE COMPLETED 1/23/07 TIME START TIME COMPLETE
Service Person Signature J. Combs
Comment Rescheduled per Customer

APPLIANCE INSPECTION			
APPLIANCES	LIT	OK	VENT
RANGE			
WATER HTR			
TEMP. SETTING	LOW <input type="checkbox"/>	NORMAL <input type="checkbox"/>	HOT <input type="checkbox"/>
SPACE HTR			
CENTRAL HH			
DRYER			
AIR COND			
GAS LIGHT			
GRILL			
OTHER			

GAS METER INSPECTION	
METER FOUND:	On _____ Off _____
Locked _____	Off At Curb _____
No Access _____	
METER LEFT: On Same Customer _____	
On New Customer _____	Off _____
Locked _____	Off At Curb _____
Removed _____	No Access _____
SPOTTED METER _____ No Access _____	

Not Required _____
 Or Reason Not Taken _____
 Or Reason Not Taken _____
 Or Reason Not Taken _____
 A B C D E No Access _____
 Yes _____ No Access _____

CUST. SIGNATURE _____

Customer Signature _____ Date Moved In _____
Date _____ SS # _____

REVIEW ORDER REASON

376909-002 (F)ield (R)outed R (D)ispatched: FOLLOW UP Grid No. 13616D Date Scheduled 02/06/07 AM X PM AL	Office Located LACLEDE Order No. 070045394 Dist. S Area 04 Account No. 376909-002 Meter No. 001324914 Meter Size 250AM Loc. AR-INSIDE
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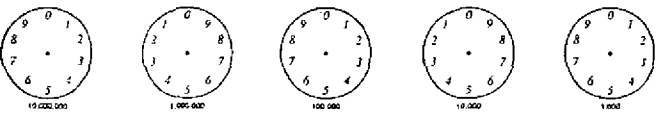
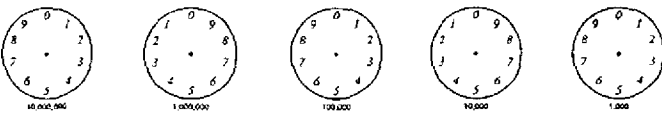
SERVICE INFORMATION: Tee 24 EWHL Main 05 SNCL Curb Box 03 NNCL Riser 00 Service 24 EWHL Material COPPER Branch Service N	Leak Information NO MATCH FOUND Leak # Location Detected Gas: Source of Gas:
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REQUIRED INSPECTIONS:
SPECIAL S.E.I.

Name FUJII, TERESITA Service Address 6363 WATERMAN AVE Township ST LOUIS, MO 63130 Special Inst: AM-AFTER 8:30 AM; PLS, CALL 20 MIN B4 314-579-9223; Special Inst: INSTALL MTR SIZE 425; MTR TEST PAPERS 2 GIBSON	Cust Phone 314-579-9223 Owner/Tenant OWNER Y FOLL UP COMMENTS: () REQD2RESCHD BY LAC-DID HAVE MTR; RESCHD 2-6-07 AM; SE 0063 JOB DESCR. MTRS 04 *** METER SERVICE ORDER *** MTR STAT ACTIVE METER CHANGE *TAKEN* 07/25/06 NEW AMR ON THIS METER TAKEN 04/18/91 BASEMENT LAST COMPLETED ORDER TOFF/TONN 09/19/06 99999 TENANT=002 COMMENT () AMR METER RBIL TONN FROM 8/16 X8748 EMP#0326/GMW Ordered By MRS FUJII
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OFFICE USE ONLY: Date Taken 01/18/07 Time Taken 14.04.58 Operator 00593 HOLLAND, DANIELLE
Mailing Address _____ City _____ ST _____ ZIP _____
Meter Sets: Town Code 550-ST LOUIS Route 1474
Rate 2RL Revenue Class 001 Norm 9153 Add 3473 Tax Code T
SVC Press LOW Geographic Location _____

() CHECK IF EXTRA FIELD WORK DONE. SEE REVERSE FOR COMPLETED INFORMATION

Main Meter 001324914	COMPLETION INFORMATION
Old Meter No. 001324914 Device Number 001324914 No. of Dials: 4 Location: AR-INSIDE	New Meter No. _____ Device Number _____ No. of Dials: _____ Location: _____ Size: 250AM MTR-TEE: _____
D.R. METER REPORT Meter Found DR _____ Device Found DR _____	Not DR _____ Not DR _____
CURRENT METER READING: 	NEW METER READING: 
READINGS ==> 9562D	LAST READ DATE 01/22/07
INDEX READING _____	Mult _____
Top/Front/Meter _____	INDEX READING _____
Bot/Rear/Device _____	Mult _____
Veeder _____	INDEX READING _____
HIGH/LOW READINGS FROM SYSTEM: Low 9614 High 9650 Verified	
ORDER STATUS _____	EMPLOYEE NUMBER _____
DATE COMPLETED 2/06/07	TIME START _____
TIME COMPLETE _____	
Service Person Signature _____	
Comment Cancelled by phone	

APPLIANCE INSPECTION			
APPLIANCES	LIT	OK	VENT
RANGE			
WATER HTR			
TEMP. SETTING	LOW <input type="checkbox"/>	NORMAL <input type="checkbox"/>	HOT <input type="checkbox"/>
SPACE HTR			
CENTRAL HH			
DRYER			
AIR COND			
GAS LIGHT			
GRILL			
OTHER			

GAS METER INSPECTION

METER FOUND: On _____ Off _____
Locked _____ Off At Curb _____
No Access _____

METER LEFT: On Same Customer _____
On New Customer _____ Off _____
Locked _____ Off At Curb _____
Removed _____ No Access _____

SPOTTED METER _____ No Access _____

Not Required _____
 Or Reason Not Taken _____
 Or Reason Not Taken _____
 Or Reason Not Taken _____
 A B C D E No Access _____
 Yes _____ No Access _____

[illegible]

The Liability, if any, of Laclede Gas Company for any and all property damages in connection with the performance of the inspection referred to herein (including, but not limited to, any assertion that anyone is required to pay for any new appliances because of Laclede Gas Company's alleged improper or negligent performance of such inspection) shall in every case be limited to an amount equal to the charges made by Laclede Gas Company for such inspection.

INSPECTED BY _____ DATE _____ TOTAL _____

SERVICEMAN'S REMARKS AND HSI OTHER COMMENTS _____

CHG MTL ONLY _____ CHG PER MIN _____ SPEC. CHG. _____ FOREMAN APPROVAL _____

☐ **(FOR TURN-ONS ONLY):** The undersigned applies for gas to be served to this address and agrees to use same in accordance with authorized rate schedules, rules and regulations. This contract to remain in force until the customer revokes it by written or verbal notice, given three days in advance of date to be discontinued.

☐ **(FOR TURN-OFFS ONLY):** I hereby request the gas company not to discontinue the supply of gas in my name at the premises mentioned on the reverse side of this order. I also certify that I am or represent the same person who previously applied for service, and whose name appears on the face of this order.

Date Moved In:

Customer Signature

Date _____ SS. # _____

REVIEW ORDER REASON

3579

FU-JP

376909-002
(F)ield (R)outed R (D)ispatched:
Grid No. 13616D
Date Scheduled 02/28/07
AM ☒ PM ☐ AL

Office Located LACLEDE
Order No. 070105820 Dist. S Area 04
Account No. 376909-002
Meter No. 001324914
Meter Size 250AM Loc. AR-INSIDE

SERVICE INFORMATION: Tee 24 EWHL Main 05 SNCL
Curb Box 03 NNCL Riser 00 Service 24 EWHL
Material COPPER Branch Service N

Leak Information NO MATCH FOUND
Leak # Class
Location
Detected Gas:
Source of Gas:

REQUIRED INSPECTIONS:

SPECIAL S.E.I.

Name FUJII, TERESITA
Service Address 6363 WATERMAN AVE
Township ST LOUIS, MO 63130
Special Inst: CALL 415 2285 20MIN UPON ARRIVAL
Special Inst: CHANG METER 4SURE *--NEEDS UPGRADE TO 107/25

Cust Phone 314-415-2285
Owner/Tenant OWNER

Y

JOB DESCR. MTRS 047 *** METER SERVICE ORDER *** MTR STAT ACTIVE
METER CHANGE

TAKEN 07/25/06 NEW AMR ON THIS METER
TAKEN 04/18/91 BASEMENT

LAST COMPLETED ORDER TOFF/TONN 09/19/06 99999 TENANT=002
COMMENT () AMR METER RBIL TONN FROM 8/16 X8748 EMP#0326/GMW
Ordered By TERESITA

OFFICE USE ONLY: Date Taken 02/26/07 Time Taken 11.01.27 Operator 00370 BOYET, MARY
Mailing Address _____ City _____ ST _____ ZIP _____
Meter Sets: Town Code 550 ST LOUIS Route 1474
Rate 2RL Revenue Class 001 Norm 9153 Add 3473 Tax Code T
SVC Press LOW Geographic Location _____

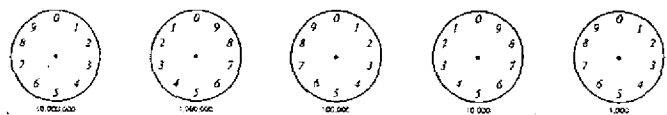
() CHECK IF EXTRA FIELD WORK DONE. SEE REVERSE FOR COMPLETED INFORMATION

Main Meter 001324914 COMPLETION INFORMATION

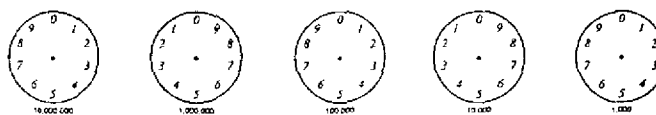
Old Meter No. 001324914 New Meter No. _____
Device Number 001324914 Device Number _____
No. of Dials: 4 No. of Dials: _____ MTR-TEE: _____
Location: AR-INSIDE Size: 250AM Location: _____ Size: _____

D.R. METER
REPORTMeter Found DR _____
Device Found DR _____Not DR _____
Not DR _____

CURRENT METER READING:



NEW METER READING:



READINGS ==>

227D

LAST READ DATE 02/21/07

INDEX READING

Mult

INDEX READING

Mult

Top/Front/Meter _____ / _____
Bot/Rear/Device _____ / _____
Veeder _____ / _____

HIGH/LOW READINGS FROM SYSTEM: Low 259 High 280 Verified

ORDER STATUS ☒ EMPLOYEE NUMBER 6434 DATE COMPLETED 2-28-07 TIME START 0850 TIME COMPLETE 0905
Service Person Signature _____
Comment _____

APPLIANCE INSPECTION			
APPLIANCES	LIT	OK	VENT
RANGE			
WATER HTR			
TEMP. SETTING	LOW <input type="checkbox"/>	NORMAL <input type="checkbox"/>	HOT <input type="checkbox"/>
SPACE HTR			
CENTRAL HH			
DRYER			
AIR COND			
GAS LIGHT			
GRILL			
OTHER			

GAS METER INSPECTION

METER FOUND: On _____ Off _____
Locked _____ Off At Curb _____
No Access ☒ _____

METER LEFT: On Same Customer _____
On New Customer _____ Off _____
Locked _____ Off At Curb _____
Removed _____ No Access ☒ _____

SPOTTED METER _____ No Access ☒ _____

Inside _____ %
 Outside 2 _____ % Control No. _____
 Exbh 0 _____ %
 Inside Set Inspection (Circle One):
 Inspected Accessible Gas Piping-OK:
 Or Explain _____

Not Required _____
Or Reason Not Taken NA
Or Reason Not Taken _____
Or Reason Not Taken _____
A B C D E No Access ✓
Yes _____ No Access ✓

Customer Signature

REVIEW ORDER REASON

FILED

376909-002 (F)ield (R)outed R (D)ispatched: FOLLOW UP Grid No. 13616D Date Scheduled 03/06/07 AM X PM AL	Office Located LACLEDE Order No. 070112661 Dist. S Area 04 Account No. 376909-002 Meter No. 001324914 Meter Size 250AM Loc. AR-INSIDE
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SERVICE INFORMATION: Tee 24 EWHL Main 05 SNCL Curb Box 03 NNCL Riser 00 Service 24 EWHL Material COPPER Branch Service N	Leak Information NO MATCH FOUND Leak # _____ Class _____ Location _____ Detected Gas: _____ Source of Gas: _____
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REQUIRED INSPECTIONS:

SPECIAL S.E.I.

Name FUJII, TERESITA Service Address 6363 WATERMAN AVE Township ST LOUIS, MO 63130 Special Inst: CALL 579 9223 20MIN UPON ARRIVAL Special Inst: CHANG METER 4SURE *--NEEDS UPGRADE TO 425	Cust Phone 314-579-9223 Owner/Tenant OWNER
---	---

FOLLOW UP COMMENTS: () RESCHED PER CUST; MISSED APPT; 00565

JOB DESCR. MTRS 04 *** METER SERVICE ORDER *** MTR STAT ACTIVE

METER CHANGE

TAKEN 07/25/06 NEW AMR ON THIS METER

TAKEN 04/18/91 BASEMENT

LAST COMPLETED ORDER TOFF/TONN 09/19/06 99999 TENANT=002

COMMENT () AMR METER RBIL TONN FROM 8/16 X8748 EMP#0326/GMW

Ordered By TERESITA

OFFICE USE ONLY: Date Taken 02/26/07 Time Taken 11.01.27 Operator 00370 BOYET, MARY

Mailing Address _____ City _____ ST _____ Zip _____

Meter Sets: Town Code 550-ST LOUIS Route 1474

Rate 2RL Revenue Class 001 Norm 9153 Add 3473 Tax Code T

SVC Press LOW Geographic Location _____

() CHECK IF EXTRA FIELD WORK DONE. SEE REVERSE FOR COMPLETED INFORMATION

Main Meter 001324914 COMPLETION INFORMATION	
Old Meter No. 001324914 Device Number 001324914 No. of Dials: 4 Location: AR-INSIDE Size: 250AM	New Meter No. _____ Device Number _____ No. of Dials: _____ MTR-TEE: _____ Location: _____ Size: _____
D.R. METER REPORT Meter Found DR _____ Not DR _____ Device Found DR _____ Not DR _____	
CURRENT METER READING:	
READINGS ==> 2270 LAST READ DATE 02/21/07	
NEW METER READING:	
INDEX READING Mult INDEX READING Mult Top/Front/Meter 395 / Bot/Rear/Device / Veeder / HIGH/LOW READINGS FROM SYSTEM: Low 291 High 334 Verified	

ORDER STATUS	✓ EMPLOYEE NUMBER	DATE COMPLETED 3-6-07	TIME START 1025	TIME COMPLETE 1055
Service Person Signature				
Comment Cancelled - sit up for 6-14-07 3 meter & cube van To up grade work				

APPLIANCE INSPECTION

APPLIANCES	LIT	OK	VENT
RANGE			
WATER HTR			
TEMP. SETTING	LOW <input type="checkbox"/>	NORMAL <input type="checkbox"/>	HOT <input type="checkbox"/>
SPACE HTR			
CENTRAL HH			
DRYER			
AIR COND			
GAS LIGHT			
GRILL			
OTHER			

GAS METER INSPECTION

METER FOUND: On _____ Off _____
 Locked _____ Off At Curb _____
 No Access ☒

METER LEFT: On Same Customer _____
 On New Customer _____ Off _____
 Locked _____ Off At Curb _____
 Removed _____ No Access ☒

SPOTTED METER _____ No Access ☒

Service Entrance Inspection:

Inside _____ %
 Outside _____ % Control No. _____
 Exbh _____ %

Inside Set Inspection (Circle One):

Inspected Accessible Gas Piping-OK:

Or Explain _____

Not Required _____

Or Reason Not Taken NA

Or Reason Not Taken _____

Or Reason Not Taken _____

A B C D E No Access ☒

Yes _____ No Access ☒

JOBGING CHARGED CODE: SEE BELOW _____

ADDRESS _____

SERVICE WORK START END DATE

CHARGE CODE TIME TIME COMP.

1ST TRIP _____

CUST. SIGNATURE _____

2ND TRIP _____

CUST. SIGNATURE _____

HOUSE SALE INSPECTION REPORT Y/NO _____

MARK APPLIANCES YES=Y NO=NO

- 02 CENTRAL HH
- 04 WATER HEATER
- 03 RANGE
- 08 DRYER
- 02 ROOM HEATER
- 07 GRILL
- 06 GAS LIGHT
- 05 AIR COND.
- 09 FUEL RUNS O.K.
- 09 CONNECT
- 01 HSI
- 11 MISC.

The Liability, if any, of Laclede Gas Company for any and all property damages in connection with the performance of the inspection referred to herein (including, but not limited to, any assertion that anyone is required to pay for any new appliances because of Laclede Gas Company's alleged improper or negligent performance of such inspection) shall in every case be limited to an amount equal to the charges made by Laclede Gas Company for such inspection.

INSPECTED BY _____

DATE _____

TOTAL _____

SERVICEMAN'S REMARKS AND HSI OTHER COMMENTS Called phone # no service

adviser door meant off

CHG MTL ONLY _____ CHG PER MIN _____ SPEC. CHG. _____ FOREMAN APPROVAL _____

- ☐ (FOR TURN-ONS ONLY): The undersigned applies for gas to be served to this address and agrees to use same in accordance with authorized rate schedules, rules and regulations. This contract to remain in force until the customer revokes it by written or verbal notice, given three days in advance of date to be discontinued.
- ☐ (FOR TURN-OFFS ONLY): I hereby request the gas company not to discontinue the supply of gas in my name at the premises mentioned on the reverse side of this order. I also certify that I am or represent the same person who previously applied for service, and whose name appears on the face of this order.

Customer Signature _____

Date Moved In _____

Date _____ SS # _____

APPLIANCE INSPECTION

Range ☒ Water Heater ☒ Dryer ☒ Room Heater ☒ Grill ☒ Gas Light ☒ Air Cond. ☒ Fuel Runs O.K. ☒ Connect ☒ HSI ☒ Misc. ☒

Service Entrance Inspection:

Inside ☒ Outside ☒ Exhh ☒

Inside Set Inspection (Circle One)

Inspected Accessible Gas Piping (Circle One)

Or Explain _____

Gas Meter Inspection

Off ☒ On ☒

Off At Curb ☒ On At Curb ☒

Off ☒ On ☒

Off At Curb ☒ On At Curb ☒

No Access ☒

No Access ☒

Photo 140-1, 12

Signature _____

Or Reason Not Taken _____

Or Reason Not Taken _____

A B C D E No Access _____

Yes _____ No Access _____

JOBBER CHARGED CODE SEE BELOW					UNITS USED	STOCK NO	DESCRIPTION OF MATERIAL	COST AMT
SERVICE CHARGE	WORK CODE	START TIME	END TIME	DATE COMP.				
1ST TRIP								
CUST. SIGNATURE _____								
2ND TRIP								
CUST. SIGNATURE _____								
HOUSE SALE INSPECTION REPORT Y=NO								
MARK APPLIANCES YES=Y NO=NO								
02 CENTRAL HH								
04 WATER HEATER								
03 RANGE								
08 DRYER								
02 ROOM HEATER								
07 GRILL								
06 GAS LIGHT								
05 AIR COND.								
09 FUEL RUNS O.K.								
09 CONNECT								
01 HSI								
11 MISC.								
<p>INSPECTED BY _____ DATE _____ TOTAL _____</p> <p>SERVICEMAN'S REMARKS AND HSI OTHER COMMENTS</p>					ADDITIONAL MATERIAL Y/N	TOTAL COST OF MATERIAL		
					LABOR MEN _____ HRS _____ MIN _____			

SERVICEMAN'S REMARKS AND HSI OTHER COMMENTS

3-14-07 + 2 men + cube box to upgrade to 425V, I special meter test in place

CHG MTL ONLY _____ CHG PER MIN _____ SPEC. CHG. _____ FOREMAN APPROVAL _____

☐ (FOR TURN-ONS ONLY): The undersigned applies for gas to be served to this address and agrees to use same in accordance with authorized rate schedules, rules and regulations. This contract to remain in force until the customer revokes it by written or verbal notice, given three days in advance of date to be discontinued.

☐ (FOR TURN-OFFS ONLY): I hereby request the gas company not to discontinue the supply of gas in my name at the premises mentioned on the reverse side of this order. I also certify that I am or represent the same person who previously applied for service, and whose name appears on the face of this order.

Date Moved In _____

Customer Signature _____ Date _____ SS # _____