TEXAS SCHOOL FACILITIES

GAS PIPE TESTING FORM

SCHOOL DISTRICT NAME:	
SCHOOL ADMINISTRATION ADDRESS/LOCATION:	
PHONE NUMBER:() DATE:	
SCHOOL DISTRICT REPRESENTATIVE SIGNATURE:	
DOCUTION.	
POSITION:	
NUMBER OF SEPARATE 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

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