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## GAS CERTIFICATE DOCUMENT

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I, \_\_\_\_\_, the GAS PIPING INSTALLER & TESTER,  
(YOUR FIRST & LAST NAME)

for \_\_\_\_\_, do hereby certify that the gas piping system  
(COMPANY NAME)

installed at \_\_\_\_\_,  
(ADDRESS OF PRESSURE TESTING)

was tested on: Month: \_\_\_\_\_ Day: \_\_\_\_\_, Year: \_\_\_\_\_; and that said tests was performed in accordance with the testing procedures provided for in the Municipal Code of South Sioux City, Nebraska & MidAmerican Energy Inc. I further find and certify that no leaks in said gas line or gas piping exist. **TESTED AT 30 LBS FOR 30 MINUTES.**

**Please Note: Once gas is turned on, a "GAS LEAK TEST" must be performed.**

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License Holder's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Date Approved: \_\_\_\_\_ Inspector: \_\_\_\_\_

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Forward Copy to: MIDAMERICAN ENERGY: fax: 712-233-4888 Phone: 712-233-4830 or Water/Sewer Dept and Contractors

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----- cut along dotted line -----

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