



# Ohio Manufactured Homes Commission

5100 Parkcenter Avenue, Suite 103, Dublin, Ohio 43017

## Gas System Testing

OWNER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ COUNTY: \_\_\_\_\_

INSTALLER: \_\_\_\_\_ OMHC LICENSE: \_\_\_\_\_

MANUFACTURER: \_\_\_\_\_ SERIAL #: \_\_\_\_\_

DATE OF MANUFACTURE: \_\_\_\_\_ HUD#: \_\_\_\_\_

The gas system was tested at the factory however, it is essential that it be rechecked for any leaks caused during transit. The OMHC licensed installer or licensed plumber shall perform the following test or verify that the gas company has tested the lines and provide results to the OMHC certified inspection agency. The inspection agency reserves the right to be present for these tests. For concerns regarding the use of this form please contact OMHC at 614-734-6010.

### Piping system testing

4781-602.6 (E) - Fuel supply system – The gas piping in a home is designed for a pressure that is at least 10” of water column and not more than 14” of water column . If gas from the supply source exceeds, or could exceed this pressure, a pressure reducer shall be installed.

1<sup>st</sup> test of partial system: (Do not check brass fittings for leaks using solutions containing ammonia)

1. Isolate all gas appliances by closing valves
2. Attach pressure gage at inlet
3. Pressurize the system with air to 3 psi (48 ounces)
4. Isolate pressure source for system
5. Pressure must remain stable for at least 10 minutes at 3 psi
6. If system fails, repair and retest
7. If piping or fittings fail they must be replaced.

System high pressure test approved - Yes \_\_\_ No \_\_\_ Conducted by: Lic. Installer \_\_\_ Lic. Plumber \_\_\_ Gas Co. \_\_\_

2<sup>nd</sup> test of total system: (Do not check brass fittings for leaks using solutions containing ammonia)

1. Open all appliance valves
2. Attach pressure gauge at inlet
3. Turn off pilot lights if possible
4. Pressure and maintain system with air at 0.25 PSI (4 ounces) for three minutes.
5. Apply non-ammonia based soapy solution to fittings.
6. If system fails repair any leaks. Defective pipe and fittings must be replaced then retest.

System low pressure test approved - Yes \_\_\_ No \_\_\_ Conducted by: Lic. Installer \_\_\_ Lic. Plumber \_\_\_ Gas Co. \_\_\_

Verify that gas appliance inlet orifices are the correct type for the type of gas used at the site.

Remarks: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of OMHC licensed Installer or licensed plumber or gas co. rep.

Print name

Date