Natural Gas Piping System and Gas Utilization Equipment  
Survey/Inspection Form for Arkansas State Accredited Schools

<table>
<thead>
<tr>
<th>School District</th>
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<tbody>
<tr>
<td>School Address/Location</td>
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</tr>
<tr>
<td>County</td>
</tr>
<tr>
<td>Phone #</td>
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Note: A form for each school building is not required. The completion of this form represents all buildings in the district or school jurisdiction. Use additional sheets if necessary for repair info.

**Gas Piping System Results**  
* Approved ☐   * Disapproved ☐

What was repaired or replaced? 
________________________________________________________________________

Date Inspected ____________________________

**Gas Utilization Equipment And Venting Results**  
* Approved ☐   * Disapproved ☐

What was repaired or replaced? 
________________________________________________________________________

Date Inspected ____________________________

**Qualified Agency**
________________________________________________________________________

Address ________________________________________________________________

Phone # _________________________________

**School Official** ________________________________________________________

02/22/2017