

Propane Pressure Test / Leak Check



LIBERTY TOWNSHIP
FIRE DEPARTMENT

Date of Test

Name of Mobile Food Vending Unit: _____

Name of Owner: _____ Phone: _____

Owner Address: _____

City: _____ State: _____ Zip Code: _____

Unit Type: (Check One)

Mobile Food Truck

Mobile Food Trailer

Pushcart

Unit License Plate: _____ State: _____ Unit VIN: _____

Type of Gas Appliance and BTU Rating

1. _____
2. _____
3. _____
4. _____
5. _____

Test Performed

Leak Test - 10 Minute Minimum
(Check One)

Passed

Failed

Pressure Test - 3 Minute Minimum
(Check One)

Passed

Failed

Comments: _____

Business Name: _____ Test Technician : _____

Business Address: _____ City: _____ State: _____

Zip Code: _____ Business Certification # _____

Business Phone: _____ Business Fax: _____ Business E-Mail: _____

Form Completed By

Date

Mobile Food Vending Unit Owner's Name

Date

Note: Test provider must email the completed form to sgilbert@libertytwp.org. Also, provide the customer a printed copy and an emailed copy.

Questions? - Please email questions to the above emails. You can also call 740-938-2027, if you get a voicemail be sure to leave a message. **Test can be performed by any Propane Specialist or Licensed Plumber that can perform the required test.**