

# 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	Pressure Test - 3 Minute Minimum (Check One)	Passed
	Failed		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](mailto: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.**