

PATRICIA A. ODETTE, Mayor  
RANDY ODETTE, Mayor Pro-Tem  
JAN SIKES, Council Member  
DON BELCHER, Council Member  
DARREL PENIX, Council Member  
SHARON BONO-BEATON, Council Member  
CHRISTOPHER PAPINEAU, Council Member



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## GAS PRESSURE TEST AFFIDAVIT

**Date:** \_\_\_\_\_ **Permit #** \_\_\_\_\_  
**Address** \_\_\_\_\_ **Lot #** \_\_\_\_\_

I hereby certify that the complete gas piping system, including all the piping from the gas Meter, the main and all branches up to the appliance connections, has been air pressure tested to \_\_\_\_\_ pounds (must be at least 20 lbs.) and that the piping is found to be free of leaks and defective materials and the system is safe to operate.

**Company Name (Print):**

\_\_\_\_\_

**Licensed Contractors Name (Print):**

\_\_\_\_\_

**License #**

\_\_\_\_\_

**Contractor of Record (Sign):**

\_\_\_\_\_

**Address:**

\_\_\_\_\_

**Phone #** \_\_\_\_\_ **Fax#** \_\_\_\_\_