NOTIFICATION OF GAS INCIDENT

DATE:_____

1. Gas Operator:

_____

2. Location of incident:

_____
_____
_____

3. Fire, explosion, or evacuations?

_____
_____
_____
_____

4. Personal injuries and/or fatalities?

_____
_____
_____
_____

5. Estimated cost of damages:

_____
_____

6. Pipeline located and marked properly? By whom?

_____
_____
_____

7. Number of gas customers affected and estimated restoration schedule:

_____
_____

8. Other pertinent information:

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