



City of Marine City
Building Department
303 S. Water St.
Marine City, MI 48039
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buildingdepartment@marinecity-mi.org

Sworn Statement for Residential Fuel Gas Pipe Testing

**All requirements of the 2009 International Fuel Gas Code, Section 406.1, inspection,
testing and purging, have been completed at the subject residential job site:**

Date: _____

Job Address: _____

Mechanical Contractor Name: _____

Driver's License No.: _____ MI Mechanical License No.: _____

Mechanical Contractor Business Name: _____

Business Address: _____

Business Phone: _____ Business Email: _____

Mechanical Contractor Signature: _____ Date: _____

TO BE COMPLETED BY THE ACTUAL INDIVIDUAL WHO IS TESTING THE GAS PIPE:

Installer's Name: _____

Installer's Address: _____

Phone: _____ Email: _____

Installer's Signature: _____ Date: _____