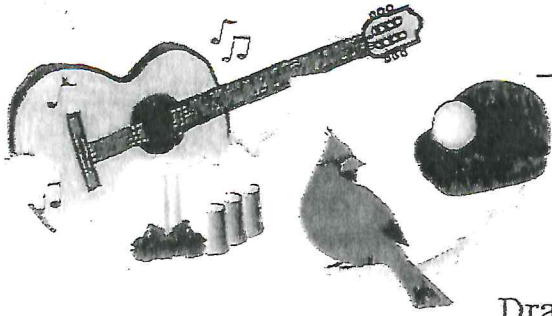


3pm Monday
CITY OF DRAKESBORO



P.O. Box 129 • Mose Rager Blvd. • Drakesboro, KY 42337
270-476-8986
(888) 662 - 2406 (Voice/TTY); (866) 557 - 5762 (Español)

Drakesboro Work Order

Work Order #: _____

Date: 11/18/20 Time: 12:40 Gas Water WW Acct #: 20-32000-2
Name: Brandi Kaugher Mobile Number: 270-291-9303
Address: 300 Masonic Dr. Beechmont Ky 42323

Work to be Done:

~~New~~ Meter# 21976852 New Reading _____
Turn on & Read _____ Old Reading 2120 (4/1/22)
Read and Lock _____ Set Meter and Lock _____
Reading Only 2120 Locate Line (See Below)
Read and Lock (Nonpayment) _____ Get Meter _____
Number _____
Check Pressure _____ Flush Line _____ Check & Leak _____
Unlock Only and Read (Do Not Turn On) _____
Special Instructions Needs pressure check & if good, turn on for new customer.

Work Done:

Flashed: Yes No GPM: _____ How Long: _____ Water Logs: _____
Water Leak: Yes No GPM: _____ How Long: _____ Water Logs: _____

Parts Used to Complete Job:

Comments: Pressure test performed, also meter bar test no leaks, shut off valve closed to furnace due to needing repairs

Work Completed By: BA & BJ Date Completed: 11-23-22

Time Started: _____ Time Ended: _____

Customer signature _____ date _____

Equal Opportunity Employer and Service Provider

The employees of Drakesboro are not trained HVAC personnel. Lighting of pilots are a courtesy and the City can not be held l



CITY OF DRAKESBORO

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270-476-8986
(888)662-2406 (Voice/TTY): (866)577-5762 (Español)

Date 11-23-22

Time 01:41

Pressure Test for Gas Line

Plumber Information:

License # _____

Phone # _____

Name: _____

Address: _____

Meter read at time of Pressure Test 2120

Pressure Tested for 10 minutes.

At 20 lbs of Pressure.

Customer: Brandt Kougher

Address: 300 Masonic Drive

Beechmont

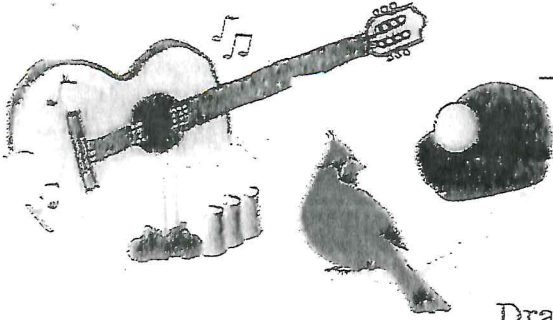
Signature of Licensed Plumber

A handwritten signature in black ink, appearing to read "R. Jan" or similar, written over a horizontal line.

Signature of City of Drakesboro gas Employee and Russmar Representative

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Drakesboro Work Order

Work Order #: _____

Date: 11/22 Time: _____ Gas Water WW Acct #: _____

Name: Brandy Kougouk Mobile Number: (502) 658-1283

Address: 300 Masonic Dr.

Work to be Done:

New Meter# _____ New Reading _____

Turn on & Read _____ Old Reading _____

Read and Lock _____ Set Meter and Lock _____

Reading Only _____ Locate Line (See Below)

Read and Lock (Nonpayment) _____ Get Meter _____

Number _____

Check Pressure _____ Flush Line _____ Check & Leak _____

Unlock Only and Read (Do Not Turn On) _____

Special Instructions fixed cap off?

Work Done:

Flushed: Yes No GPM: _____ How Long: _____ Water Logs: _____

Water Leak: Yes No GPM: _____ How Long: _____ Water Logs: _____

Parts Used to Complete Job:

Comments:

Work Completed By: _____ Date Completed: _____

Time Started: _____ Time Ended: _____

Customer signature _____ date _____

Equal Opportunity Employer and Service Provider

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Meter Turn On and Turn Off Form - 1201

City/Company:

Information

Turn On Turn Off

Date:

Time:

Address:

Meter Number:

Meter Reading:

Reason for Turn Off/On?

Was the Meter Valve Locked? Yes No

Additional Remarks:

Completed By: