

### MAOP OF GAS SYSTEMS

DIVISION \_\_\_\_\_

DISTRICT \_\_\_\_\_

SYSTEM IDENTIFICATION <small>(LIST ALL SEMI-HIGH PRESSURE AND HIGH-PRESSURE SYSTEMS, AND DISTRIBUTION FEEDER MAINS)</small>		MAOP	DISTRICT REGULATOR STATIONS WHICH FEED THIS SYSTEM	LIST STATIONS BY GASFM NUMBER	TYPE OF DOCUMENTATION <small>(SEE KEY I)</small>	IS MAOP PROPERLY ESTABLISHED? IF NOT DOCUMENTED OR NOT HIGH ENOUGH, DESCRIBE ACTION TO BE TAKEN. <small>(SEE KEY II)</small>	PROPOSED COMPLETION DATE
SYSTEM	LOCATION						

**KEY I: TYPE OF DOCUMENTATION**

- A. Pressure chart or some other written record during five years ending 7/1/70 (enter pressure record date).
- B. Tested per 49 CFR Paragraph 192.619 (a) (2) (enter test date and Job #).
- C. Record of pressure at the time of the oldest leak survey records available. (indicate type of record and date).
- D. Uprate by incremental pressure increase(s) per 49 CFR 192, Paragraph 192.557 (enter date and Job #).

Signatures: (Print and Sign)

Date of system revision \_\_\_\_\_  
 Completed by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
 Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

**KEY I: TYPE OF DOCUMENTATION (Cont.)**

- E. Statement by operating personnel that the pressure during last leak survey is the same as pressure of record (MAOP must be verified by recording pressure during next leak survey -indicate date(s) of survey in "Proposed Completion Date" column).

**KEY II: MAOP CORRECTIVE ACTION**

- F. Document MAOP by recording pressure during next leak survey.
- G. Uprate by incremental pressure increase(s) (per 49 CFR 192, Paragraph 192.557).