

Documentation for Deactivation of Distribution Gas Facilities

1. Instructions

- A. Estimating/mapping personnel must stamp the utility's original or copy of the Gas Service Record with the Gas Service Deactivation stamp ([Figure 1](#)) and send it to the local gas construction department for action. Estimating/mapping personnel must fill in the following data fields on the stamp:
- The name of the person requesting the cut-off (usually a mapper).
 - The date of the request.
 - The required completion date for the work (no later than 12 months from the date the mapping department identifies that the service line must be deactivated).
- B. To document the actions taken, the foreman must fill in the following fields on the deactivation stamp:
- 1) Was the line was cut off?: Yes/No
If Yes, was the line cut off at the main or at the pipeline?
If No, indicate the reason (see below).
 - a. The site was excavated, but the pipe could not be located.
 - b. The site could not be excavated, and the gas line was not deactivated. Provide a description of why the excavation did not take place (e.g., moratorium street, special paving requirements, located in decorative driveway or landscaped area).
 - 2) Upon completion of work, the foreman must fill in the following fields in ink:
 - a. The foreman's name and signature confirming that his or her crew performed the work (to be signed **only** by the foreman whose crew completed the work, in ink).
 - b. The date completed.
- C. It is the mapping supervisor's responsibility to provide the stamps for the local mapper responsible for service deactivation, and it is the estimating/mapping supervisor's and gas supervisor's responsibility to hold tailboards with mapping and construction personnel to instruct them on the proper completion of the stamp.

It is the gas supervisor's responsibility to ensure that the data required on the stamp is complete.
The stamp must be completed in indelible ink.

GAS SERVICE DEACTIVATION
REQUESTED BY:
DATE:
REQUIRED COMPLETION DATE:
<input type="checkbox"/> SERVICE C/O --- <input type="checkbox"/> @ MAIN or <input type="checkbox"/> @ P/L
<input type="checkbox"/> SITE EXCAVATED-NOT LOCATABLE
<input type="checkbox"/> NOT EXCAVATED-NOT DEACTIVATED
REASON:
FOREMAN'S NAME:
FOREMAN'S SIGNATURE:
DATE COMPLETED:

Figure 1. Gas Service Deactivation Stamp