



Customer Agreement

Please read the following carefully, initial each paragraph, sign and date at the bottom.

The customer is responsible for identifying all underground objects that might be damaged in the process of installing the new service line. Underground objects are, but not limited to septic tanks, drain fields, sewer lines, water lines, irrigation lines and electrical/cable lines not owned by a company. _____ Cust. Initials

The customer will physically mark any underground objects within (+) or (-) 30 inches, using paint, flags or stakes. If underground objects are not adequately marked, the customer will assume full responsibility for any damage to underground objects. In areas with trees, Fountain Inn Natural Gas (FING) will make every attempt to protect them; however, FING will not be held responsible for root damage and/or the overall health of any tree. _____ Cust. Initials

Once the job is completed, FING will make every attempt to restore the yard to its original level, raking the topsoil, adding grass seed and straw in the affected areas. If you have any concerns regarding your yard, grass, plants, etc., please notify us immediately before starting the work so we can discuss options with you. _____ Cust. Initials

Equipment Installed

Please indicate below the number of each type of gas equipment being installed:

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> Gas Furnace | <input type="checkbox"/> Gas Logs | <input type="checkbox"/> Gas Water Heater | <input type="checkbox"/> Gas Range/Cook Stove |
| <input type="checkbox"/> Gas Tank-Less Water Heater | <input type="checkbox"/> Pool Heater | <input type="checkbox"/> Generator | |
| <input type="checkbox"/> BBQ Grill | <input type="checkbox"/> Gas Assisted Heat Pump | <input type="checkbox"/> Gas Lights | |
| <input type="checkbox"/> Other _____ | | | |

What is the approximate location from edge of street to desired gas meter location? _____ feet.

TOTAL BTU LOAD PER HOUR: _____ (Contractor/Installer will have this information)

DELIVERY PRESSURE REQUIRED:

- | | | |
|-----------------------------------|--------------------------------------|--------------------------------------|
| <input type="checkbox"/> 7" Meter | <input type="checkbox"/> 2 lb. meter | <input type="checkbox"/> 5 lb. meter |
|-----------------------------------|--------------------------------------|--------------------------------------|

Customer Signature: _____ Date: _____