

**PATROLLING OF PIPELINE SYSTEM**

**FORM 4**

**COMPANY:** \_\_\_\_\_

**Period Covered: Began** \_\_\_\_\_ **Ended** \_\_\_\_\_

**Areas Covered:** \_\_\_\_\_

\_\_\_\_\_

**Map References:** \_\_\_\_\_

\_\_\_\_\_

**Leakage Indications Discovered (describe locations and indications, such as a condition of vegetation):**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Describe any unusual conditions at highway and railroad crossings:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Other Factors noted which could affect present or future safety or operations of the gas system:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Follow-up (repairs, maintenance or test resulting from this inspection):** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Comments:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Number of Persons in Patrol Party:** \_\_\_\_\_

**Signature of Person in Charge of Patrol Party:** \_\_\_\_\_

**Date:** \_\_\_\_\_