

## 1110 WEST WASHINGTON, SUITE 280 PHOENIX, ARIZONA 85007 PHONE: 602-771-1000 | FAX: 602-771-1002 [WWW.AZHOUSING.GOV]

## UTILITY TESTING REPORT FORM

Permit Numbe	er:	
Installation Address:		
Unit Manufac	turer:	
HUD Number:		Serial Number:
Installer Name:		_License Number:
Installation Ce	ertificate Number:	
Dealer Name:		License Number:
AI	LL TESTS SHALL COMPL Water – 3285.603, 3280.612 Gas – 3285.605, 3280.705	Y WITH 24 CFR §§ 3280 AND 3285 Sewer – 3285.604, 3280.612 Electric – 3285.701, 3280.810(b)
Gas Test:		Electrical Test:
Water Test: _		Sewer Test:
Date:		Signature:
NOTES:		