

APPLICATION FOR CERTIFICATION OF EARTHQUAKE-ACTUATED GAS SHUTOFF VALVE (ESV)

Certification form to be completed for each valve by the manufacturer of the automatic gas shutoff valve.

Submit completed form, with a \$500 certification fee for each valve (payable to Division of the State Architect) to: Division of the State Architect, 1102 Q Street, Suite 5100, Sacramento, CA 95811-6550, ATTN: Gas Shutoff Valve Certification Program.

FOR DSA USE ONLY

Certification No.:

Zip

APPLICATION INFORMATION:

Manufacturer:

Work Address:

City

Work Phone:

Application	is	hereby	made	for	certification	of

Valve	Model	No.

Valve Size:

Work Fax:

State

TESTING:				
Testing Laboratory:				
Work Address:				
City		State		Zip
Work Phone:	Wor	k Fax:		
Verification No. (Qualified Testing Laboratory):				
Test Report No.:	Date	e Tested:		
Tested By (Qualified Testing Person):	Title	:		

PRODUCTION INSPECTION:				
Inspection Service Agency:				
Work Address:				
City	State	Zip		
Work Phone:	Work Fax:			
Verification No. (Qualified Inspection Service Agency):				
Inspection Schedule:				

PROPOSED LABEL:

By:		
Title:		
Date:		