

APPLICATION FOR FIELD APPROVAL OF GAS EQUIPMENT/APPLIANCES

Owner: _____ Address: _____ Phone: _____

LOCATION OF INSTALLATION

Urban: City/Town _____ Address: _____

Rural: R.M.# _____ Land Location: LSD _____ Sec _____ Twp _____ Rg _____ W of _____

APPLICANT

Company: _____ Phone Number: _____

Address: _____ Contact/Name: _____

LICENSED GAS CONTRACTOR

Company: _____ Phone Number: _____

Address: _____ Contact/Name: _____

Permit Number: _____

EQUIPMENT New appliance **OR** A replication of a previously approved unit **OR** Burner/manifold replacement

Manufacturer's Name: _____ Address: _____

Type of Appliance: _____ Year Built: _____

Type of Gas: Propane Natural Gas Casing Gas Other: _____

Is the fuel gas sour? Yes No See chart on back page for sour gas definition

Copper/Brass Fittings? Yes No

Serial Number: _____ (Required) Model Number: _____ (Required)

Supply Pressure: _____ (psig) Press. Downstream of Regulator: _____ (psig) Manifold Pressure: _____ (psig)

High Pressure Switch Setpoint: _____ (psig) Low Pressure Switch Setpoint: _____ (psig)

Main Max Input: _____ (Btu/hr) Pilot Max Input: _____ (Btu/hr) Type of Venting: _____

Fuel Train External Temperature Range: - _____ °C to + _____ °C Stack Temperature: _____ (degree Fahrenheit)

SEND NO MONEY, YOU WILL BE INVOICED. E-MAIL APPLICATIONS ARE PREFERRED.

ALONG WITH THE APPLICATION, PROVIDE DOCUMENTATION OF THE FOLLOWING ITEMS BY E-MAIL, FAX OR MAIL:

- 1. A valve train schematic
- 2. A ladder style electrical schematic
- 3. A bill of materials including model #, part # and name of manufacturer
- 4. A sequence of operation

TO:

Gas Codes & Standards
 #177-1621 Albert Street Phone: 1-888-757-6937 Fax: (306) 566-2906
 Regina, SK S4P 0S1 E-Mail: geis@saskpower.com

NOTE: APPROVAL PERTAINS TO THE FUEL RELATED COMPONENTS AND ACCESSORIES AND THEIR ASSEMBLY ON AN APPLIANCE UTILIZING GAS. THIS DOES NOT INCLUDE APPROVAL FOR ELECTRICAL OR MECHANICAL DESIGN.

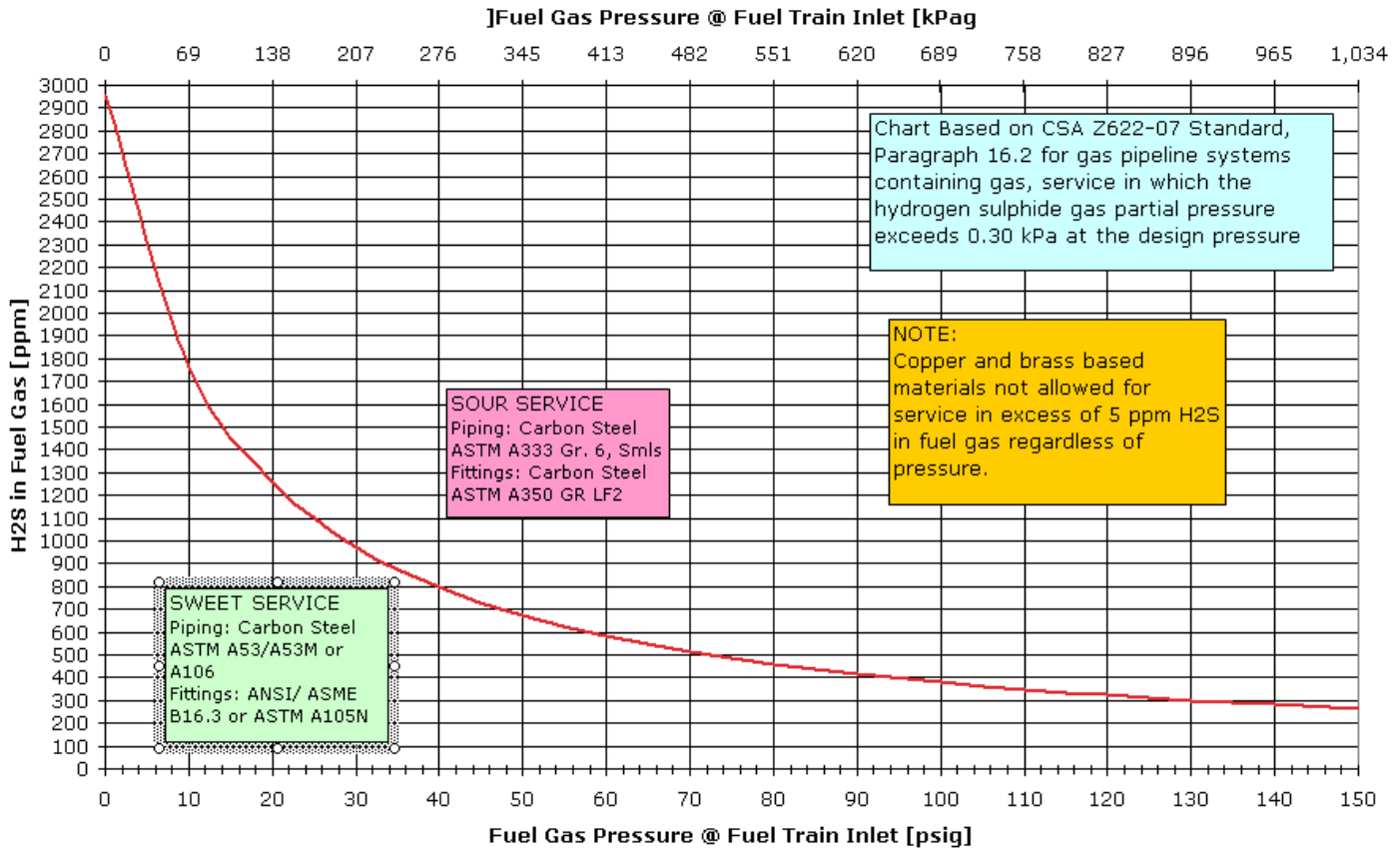
For SaskPower Use Only:

Inspection District: _____ Inspector: _____ Label Number: _____

Permit Number: _____ Approved Application: _____ Date: _____

FIELD APPROVAL FEE: _____ (includes GST) INVOICE DATE: _____

Sour Gas H2S Limit in Fuel Gas Piping



Inlet Pressure psig	Inlet Pressure kPag	Inlet Pressure kPa Abs	Max H2S partial pressure kPa abs	Molar fraction 1	Max H2S allowable ppm
0	0	101.3	0.3	0.0029615	2962
10	68.94	170.24	0.3	0.001762218	1762
20	137.88	239.18	0.3	0.001254285	1254
30	206.82	308.12	0.3	0.000973647	974
40	275.76	377.06	0.3	0.000795629	796
50	344.7	446	0.3	0.000672646	673
60	413.64	514.94	0.3	0.000582592	583
70	482.58	583.88	0.3	0.000513804	514
80	551.52	652.82	0.3	0.000459545	460
90	620.46	721.76	0.3	0.000415651	416
100	689.4	790.7	0.3	0.000379411	379
110	758.34	859.64	0.3	0.000348983	349
120	827.28	928.58	0.3	0.000323074	323
130	896.22	997.52	0.3	0.000300746	301
140	965.16	1066.46	0.3	0.000281305	281
150	1034.1	1135.4	0.3	0.000264224	264