

**TOWN OF WELLS  
AFFIDAVIT OF FUEL SYSTEM INSTALLATIONS**

PROPERTY ADDRESS: \_\_\_\_\_ Map & Lot: \_\_\_\_\_

**Fuel Used:**

- Oil       Propane / Natural Gas       Solid Fuel Central Heat

**Please check off all Systems/Appliances installed:**

- Boiler  
 Warm Air furnace  
 Water Heater       Direct Fired       Indirect Fired       On-Demand  
 Room Heater  
 Range       Residential       Commercial  
 Generator  
 Propane Tank w/piping to regulator\*(Requires Tank setter /Outside Piping Technician Authority)  
 Vehicle Protection provided in accordance with Maine Fuel Board Rules  
 Tanks in flood prone areas anchored in accordance with NFPA 58 and FEMA  
 Propane Dispensing Station (Requires Tank setter/ Outside Piping Technician Authority)  
 Other: \_\_\_\_\_

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- Master Oil Burner Technician    License # \_\_\_\_\_ Expiration: \_\_\_\_\_  
 Journeyman Installed (Master must personally inspect and accept responsibility for installation)

Journeyman: Name: \_\_\_\_\_ License #: \_\_\_\_\_  
**(MASTER MUST SIGN THIS FORM NOT JOURNEYMAN)**

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- Gas Licensee w/ Appliance Connection & Service Authority  
License #: \_\_\_\_\_ Expiration: \_\_\_\_\_ Authorities Held: \_\_\_\_\_  
 Large Equipment Authority (Over 500,000 BTU Appliances)

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- Gas Licensee w/Tank setter /Outside Pipe Authority  
License #: \_\_\_\_\_ Expiration: \_\_\_\_\_ Authorities Held: \_\_\_\_\_

**By signing below, I attest that I have installed the above Installation(s) and certify that it meets all Standards and rules adopted by the Maine Fuel Board in accordance with 32 MRSA §18107 "Installations to Conform to Standards".**

\_\_\_\_\_  
Name (Printed)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date