

TO: Operations Manager
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Re: Replacement Of Turbine Meter Reading

We confirm that the Turbine Meter readings at the commencement of the operation are as follow:

Date taken: _____ Time: _____

Meter Serial No.: _____

Tag No.: FT -

	READINGS
Mechanical Counter	
Uncorrected Volume	
Corrected Volume	
Flow Rate	
REMARKS:	

Company Name: _____
Facilities Location: _____
24 hr Contact No. for Emergency: _____
Contact Person: _____

Witnessed By:

Signature: _____
Gas Customer Rep Name : _____
Position: _____
Date: _____

Signature: _____
SembGas Rep Name: _____
Position: _____
Date: _____