



GAS CERTIFICATE OF COMPLIANCE

B 257805

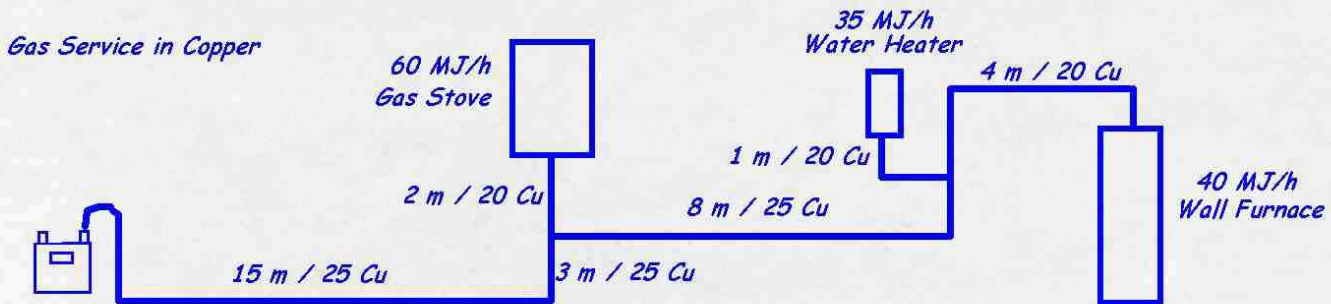
As required by the Gas Act 1997 and administered by the Office of The Technical Regulator

Dear Customer, Any new work, alterations or additions to a gas installation, including appliances, must be performed by a Licensed Gas Contractor or Gas Fitter. Please contact the contractor listed below should you require any information about the work set out in this form.

INSTALLATION DETAILS

| | | | |
|--|--|--|---|
| Customer Name | <i>Mr Joe Citizen</i> | Phone | <i>08 87654321</i> |
| Installation Address | <i>73 South Terrace Adelaide</i> | Facsimile | |
| Postal Address <i>(if not as above)</i> | | Date Installation Work Completed | <i>17/4/2007</i> |
| TYPE OF WORK | TYPE OF SUPPLY AND PREMISES | | TYPE OF INSTALLATION |
| <input checked="" type="checkbox"/> New Installation <input type="checkbox"/> Alteration/Addition involving: <input checked="" type="checkbox"/> Consumer Pipework <input checked="" type="checkbox"/> Appliance Installation <input type="checkbox"/> Conversion <input type="checkbox"/> Other (describe) | <input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> LPG: <input type="checkbox"/> Insitu Fill cylinders <input type="checkbox"/> Exchange cylinders <input type="checkbox"/> House/Domestic <input checked="" type="checkbox"/> Flat/Unit <input type="checkbox"/> Shop <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial | | <input type="checkbox"/> Farm <input type="checkbox"/> Caravan Park <input type="checkbox"/> Marine/Houseboat <input type="checkbox"/> Recreational vehicle (Reg'n No.....) <input type="checkbox"/> Swimming Pool <input type="checkbox"/> Other (describe) |
| | | <input checked="" type="checkbox"/> Water Heater Replacement Make ... Cold-One ... Capacity <i>135L</i>litres Model ... Hot-One <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Electric Make & model of cooking/heating appliance <i>Rapid-Cook Stove</i> <i>Nice-Warm Wall Furnace</i> <input type="checkbox"/> Type B Appliance (defined in AS5601/AS3814) | |

DIAGRAM AND NOTES (attach additional sheets if required)



FAULTS IDENTIFIED AND BROUGHT TO CUSTOMER'S ATTENTION

Nil - New Installation

Customer Signature

DETAILS OF CONTRACTOR

| | | | |
|---------------------------------------|---|-----------------|---------------------|
| Business Name | <i>Gas in 1 Minute</i> | Telephone | <i>08 12345678</i> |
| Address | <i>15 Good Street Elsewhere SA 5000</i> | Mobile | <i>0444 444 444</i> |
| Licence Number (include prefix) | <i>PGE 9987654321</i> | Facsimile | |

TEST/CHECK CERTIFICATE

I certify that I have carried out the following tests/checks on the gas installation work detailed in this certificate and the results satisfy the requirements of the Gas Act and Regulations 1997, or I have placed a defect tag on it.

Test for soundness
 Commissioned to manufacturer's requirements

GAS FITTER Name

Signature *Bill Bloggs* Registration Number *PGE 9987654321* Date *17/4/2007*

I certify that auxiliary water plumbing work I have carried out meets the requirements of the Waterworks Regulations 1996.

PLUMBING WORKER Name

Signature Registration Number Date

I certify that auxiliary electrical work I have carried out meets the requirements of the Electricity Act 1996.

RESTRICTED ELECTRICAL WORKER Name

Signature Registration Number Date

I certify that gas fitting work is in compliance with the Gas Act and Regulations 1997, auxiliary water plumbing work in compliance with the Waterworks Regulations 1996, and auxiliary electrical work in compliance with the Electricity Act 1996.

CONTRACTOR Name *Bill Bloggs* Signature *[Signature]* Date *17/4/2007*