



# ELECTRICAL CERTIFICATE OF COMPLIANCE & ELECTRICAL SAFETY CERTIFICATE

REFERENCE/CERTIFICATE ID NO.:

209196

This form has been designed to be used by licensed electrical workers to certify that installations or Part installations under Part 1 or Part 2 of AS/NZS 3000 are safe to be connected to the specified system of electrical supply.

Location Details:

2471 SHI Kairwaka

Contact Details:  
(Name and address)

George Svenson

Name of Electrical worker:

Paul Greig

Registration/Practising licence number:

E241452

Phone & email:

021 230 2717 paulgreig.pg@gmail.com

Name and registration number of person(s) supervised:

## Certificate of Compliance

Type of work:

Addition  Alteration  New work  
 Low risk  General  High-risk (Specify):

The prescribed electrical work is:

Means of compliance:

Part 1 of AS/NZS 3000  Part 2 of AS/NZS 3000

Additional Standards or electrical code of practice were required:

No  Yes (specify):

Date or range of dates that prescribed electrical work undertaken:

10/5/19 - 20/9/19

Contains fittings that are safe to connect to a power supply?

Yes  No

Specify type of supply system:

The installation has an earthing system that is correctly rated (where applicable)

Yes  No

Parts of the installation to which this certificate relates that are safe to connect to a power supply?

All  Parts (specify)

The work relies on manufacturers instructions:

Yes  No

If yes - identify the instruction manual including name, date and version. Also attach a copy of manufacturer's instructions to this certificate. (Or provide reference to readily accessible electronic format, eg Internet link.)

Identify:  
Link:

The work has been done in accordance with a certified design:

Yes  No

If yes - identify the certified design including name, date and version. Also attach a copy of the certified design to this certificate. (Or provide reference to readily accessible electronic format, eg Internet link.)

Identify:  
Link:

The work relies on a Supplier Declaration of Conformity (SDoC):

Yes  No

If yes - identify the SDoC including name, date and version OR EESS registration. Also attach a copy of the SDoC to this certificate. (Or provide reference to readily accessible electronic format, eg Internet link.)

Identify:  
Link:

The installation has been satisfactorily tested in accordance with the Electricity (Safety) Regulations 2010

No  Yes

Description of Work:

rewire + fit-off sleepout with caravan inlet, sw bcd, 7 x ppts + 4x lights.

Test Results (provide values)

Polarity (Independent earth):		<input checked="" type="checkbox"/>
Insulation resistance:	100M	Ohms
Earth Continuity:	.1	Ohms
Bonding:	.1	Ohms
Fault Loop impedance		Ohms
Other (specify):		

By signing this document I certify that the completed prescribed electrical work to which this Certificate of Compliance applies has been done lawfully and safely, and the information in the certificate is correct.

Certifier's signature:

*P. Greig*

Date:

20/9/19

## Electrical Safety Certificate

By signing this document I certify that the installation, or part of the installation, to which this Electrical Safety Certificate applies is connected to a power supply and is safe to use.

Certifier's name:

Paul Greig

Registration/Practising licence number:

E241452

Certifier's signature:

Certificate Issue Date:

Connection Date:

CUSTOMER COPY - THIS IS AN IMPORTANT DOCUMENT AND SHOULD BE RETAINED FOR A MINIMUM OF 7 YEARS



# ELECTRICAL CERTIFICATE OF COMPLIANCE & ELECTRICAL SAFETY CERTIFICATE

REFERENCE/CERTIFICATE ID NO. 2019A

## Combined Certificate of Compliance and Electrical Safety Certificate

Unique ID: 2018 - 435 Kawaka

Note: If you are using this form to provide only an Electrical Safety Certificate, then only complete sections 1, 3 and 5

### 1. Customer Information

Customer Name: GEORGE SUENSON Registration/Practising E241452

Customer Phone / Email: 020 407 92406 g.suen@gmail.com

Location of Installation: B 44c CABBAGE TREE RD KOUTU

### 2. Certifier Information

Certifier Name: MARA SINCLAIR Registration / Practising Licence Number: E11983

Organisation: good power hokitika Telephone Number: 0275 762625

Email: good power hokitika@gmail.com

Name and Registration Number of person(s) involved in work and supervised by certifier: \_\_\_\_\_

### 3. Details of work to which certificate applies

The work is:  an entire installation  a specific part of an installation

The work is:  High Risk  General  Low Risk (Certificate of Compliance not required)

Indicate the number of each item installed or altered:

Number of lighting outlets:	<u>TO INSTAL SUBMETER TO SLEEP OUT &amp; CHECK TEST</u>
Number of socket outlets:	
Number of ranges:	
Number of water heaters:	

General Description of Work: \_\_\_\_\_ Tick (✓) if work includes:

- Mains
- MEN switchboard closest to point of supply
- Main Earthing System
- Electric Lines

Period within / Date on which the work was done: 10/1/2020

The work is safe to be connected to:  230/400V MEN System  Other (specify) SOLAR, 230V

### 4. Certificate of Compliance

I am satisfied that the work to which this Certificate of Compliance applies has been done lawfully and safely and the information in this certificate is correct. The work:

- complies with Part 1 of AS/NZ 3000  complies with Part 2 of AS/NZ 3000
- complies with the following standard(s): \_\_\_\_\_
- has been installed in accordance with a certified design (attach or reference\*)
- has an earthing system that is correctly rated
- contains fittings which are safe to connect to a power supply
- relies on supplier's Declaration of Conformity (attach or reference\*)
- relies on manufacturer's instructions (attach or reference\*)
- has been satisfactorily tested in accordance with Electricity (Safety) Regulations 2010
- is safe to connect

Test Results:		
	Electrical Worker	Inspector
Polarity (independent earth):	✓	
Insulation resistance:	✓	
Earth continuity:	.1	
Bonding:		
Other (specify):		

KCD 1x 25m/s 5x 7m/s 1x 33m/s 5x 12m/s 21m/Am/s

Electronic reference: \_\_\_\_\_

Certifier's Signature: [Signature] Date: 10/1/2020

\* If it is impractical to attach a copy of any relevant certified design, manufacturer's instruction or supplier declaration of conformity, provide a reference to where the documents can be found, in a readily accessible format, through electronic means.

### 5. Electrical Safety Certificate

Date on which the connection was done: \_\_\_\_\_

I am satisfied that the work to which this Electrical Safety Certificate applies is connected to a power supply and is safe to use

Name: \_\_\_\_\_ Registration / Practising License Number: \_\_\_\_\_

Signature of Connector: \_\_\_\_\_ Date: \_\_\_\_\_



# Combined Certificate of Compliance and Electrical Safety Certificate

Unique ID: 2018 - 436

Note: If you are using this form to provide only an Electrical Safety Certificate, then only complete sections 1, 3 and 5

## 1. Customer Information

Customer Name: George Svenson  
 Customer Phone / Email: 02040792406  
 Location of Installation: 44c cabbage tree road koutu

## 2. Certifier Information

Certifier Name: \_\_\_\_\_ Registration / Practising Licence Number: \_\_\_\_\_  
 Organisation: \_\_\_\_\_ Telephone Number: 0275 767625  
 Email: goodpowerhold@gmail.com  
 Name and Registration Number of person(s) involved in work and supervised by certifier: \_\_\_\_\_

## 3. Details of work to which certificate applies

The work is:  an entire installation  a specific part of an installation  
 The work is:  High Risk  General  Low Risk (Certificate of Compliance not required)

Indicate the number of each item installed or altered:

Number of lighting outlets: \_\_\_\_\_  
 Number of socket outlets: \_\_\_\_\_  
 Number of ranges: \_\_\_\_\_  
 Number of water heaters: \_\_\_\_\_

General Description of Work

ONE BEHIND UNIT  
Solar panel mains cable  
to unit and sub main  
to sleep out

Tick (✓) if work includes:

- Mains
- MEN switchboard closest to point of supply
- Main Earthing System
- Electric Lines

Period within / Date on which the work was done: 10/1/2020.

The work is safe to be connected to:  230/400V MEN System  Other (specify) \_\_\_\_\_

## 4. Certificate of Compliance

I am satisfied that the work to which this Certificate of Compliance applies has been done lawfully and safely and the information in this certificate is correct. The work:

- complies with Part 1 of AS/NZ 3000  complies with Part 2 of AS/NZ 3000
- complies with the following standard(s): \_\_\_\_\_
- has been installed in accordance with a certified design (attach or reference\*)
- has an earthing system that is correctly rated
- contains fittings which are safe to connect to a power supply
- relies on supplier's Declaration of Conformity (attach or reference\*)
- relies on manufacturer's instructions (attach or reference\*)
- has been satisfactorily tested in accordance with Electricity (Safety) Regulations 2010
- is safe to connect

Test Results:		
	Electrical Worker	Inspector
Polarity (independent earth):	✓	
Insulation resistance:	✓	
Earth continuity:	✓	
Bonding:		
Other (specify):		

RCD, 1x 33 m/s 5x 11 m/s 21 m/Amps  
1x 23 m/s 5x 6 m/s

Electronic reference: \_\_\_\_\_  
 Certifier's Signature: [Signature]

Date: 10/1/2020

\* If it is impractical to attach a copy of any relevant certified design, manufacturer's instruction or supplier declaration of conformity, provide a reference to where the documents can be found, in a readily accessible format, through electronic means.

## 5. Electrical Safety Certificate

Date on which the connection was done: \_\_\_\_\_

I am satisfied that the work to which this Electrical Safety Certificate applies is connected to a power supply and is safe to use

Name: \_\_\_\_\_ Registration / Practising License Number: \_\_\_\_\_

Signature of Connector: \_\_\_\_\_ Date: \_\_\_\_\_



# GASFITTING CERTIFICATE OF COMPLIANCE



Client Name: GEORGE SVENSON

Reference or Job #: EBC 2020-11226/0 ICP (if known):

Address of work: 44c cabbage tree bay rd RP3

Suburb: Kowtu Town / City: KAIKOHE 0473

Description of gasfitting work: (If different gasfitting work was done by different people, state who did what gasfitting.)

Install pipe work for 10L GAS Hot water, gas hob and connection reg/pigtail for 1 9kg bottle.

Gas supply pressure 2.75 kPa Risk classification (tick one)  Low-Risk  General  High-risk

Gas type (tick one)  Natural gas  LPG  Biogas  Other (specify)

The work has been done in accordance with a certified design:  Yes  No

If yes - identify the certified design including name, date and version. Also attach a copy of the certified design to this certificate.  
(Or provide reference to readily accessible electronic format, eg Internet link.)

Identify:  
Link:

The work relies on manufacturer's instructions:  Yes  No

If yes - identify the instruction manual including name, date and version. Also attach a copy of manufacturer's instructions to this certificate.  
(Or provide reference to readily accessible electronic format, eg Internet link.)

Identify:  
Link:

The work has been done in accordance with means of compliance (specify):

Yes - AS/NZS 5601.1 sections 3 to 6  Yes - AS/NZS 5601.2 sections 3 to 9  No

Were any other standards or gas code of practice required for compliance?

Yes (specify)   No

Parts of the gas installation that are safe to connect to a gas supply?

All  Parts (specify)

Date(s) on which the work was done (if different from date of certifying gasfitting):

Name and registration number of anyone who carried out work under supervision:

By signing this document I confirm that I am satisfied that the work described in this certificate of compliance has been done lawfully and safely, and that the information on this certificate is correct.

Certifier name: MARK HENSON

Registration number: 30451 Certificate Issue Date: 19/11/19

Signature:

Outline any additional information attached: