

GASFITTING CERTIFICATE OF COMPLIANCE



Client Name: AK & JM ENGLAND

Reference or Job #: ICP (if known):

Address of work: 25 TALMATAWIWI STREET

Suburb: Town / City: OPONGON I

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

Install Bernia A 24, pipe work, regulator and pig Tail Set for 2x 45 Kg bottles

Gas supply pressure 275 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: 15/4/19

Signature:

Outline any additional information attached: