



# GAS SAFETY & COMPLIANCE CERTIFICATE

Gas safety Certificate and certificate of compliance made pursuant to Regulations 46 and 52B of the Gas (safety and Measurement) Regulations 2010 (as amended) and Energy Work Certificate made pursuant to Regulation 19 of the Building Act 2004

<b>CLIENT</b>	MARTIN BABER	<b>INSTALLATION</b>	
<b>ADDRESS</b>		<b>ADDRESS</b>	8 ARAPITO RD TITIRANGI AUCKLAND
<b>DESCRIPTION AND LOCATION OF THE GASFITTING:</b> TO RELOCATING GAS BOTTLES TO NEW COMPLIANT POSITION. INSTALL NEW AUTOCHANGE AND RUN PIPING TO NEW POSITION AND RECONNECT TO EXISTING PIPEWORK TEST AND COMMISSION TESTED SOUND			
<b>Gas Appliances Installed:</b> PIPEWORK TO NEW COMPLIANT POSITION			
<b>GAS TYPE</b> Nat Gas/LPG	LPG 2X 45KG BOTTLES	<b>GAS TEST RESULTS</b>	7KPA TEST PRESSURE 2.78KPA WORKING PRESSURE NIL/LOSS/GAIN 10 MINUTES
<b>DATE GASFITTING PERFORMED</b>	25/11/2024	<b>DATE OF GAS CONNECTION</b>	25/11/2024
<b>STANDARD RISK CLASSIFICATION (tick one)</b> <input type="checkbox"/> Low <input type="checkbox"/> General <input checked="" type="checkbox"/> High			
<b>NAME, REGISTRATION NUMBER(IF ANY) OF PERSONS WHO CARRIED OUT GASFITTING UNDER SUPERVISION:</b>  "I believe on reasonable grounds that: (a) the gasfitting work described above has been done lawfully and safely; and (b) the work has been done in accordance with (tick one); <input checked="" type="checkbox"/> sections 3 to 6 of AS/NZS 5601.1, or <input type="checkbox"/> sections 3 to 9 of AS/NZS 5601.2; and (c) the work <input type="checkbox"/> has <input checked="" type="checkbox"/> has not (tick one) been done in accordance with certified design; and (d) the work done <input checked="" type="checkbox"/> has <input type="checkbox"/> has not (tick one) relied on any manufacturers instructions ; and (e) this certificate relates to <input checked="" type="checkbox"/> the whole <input type="checkbox"/> part (tick one) installation described above; and (f) the gas installation is connected to a gas supply and is safe to use; and (g) the information contained in the certificate is correct".			
<b>CERTIFICATE ATTACHMENTS (tick as applicable)</b> <input type="checkbox"/> Manufacturers Instructions <input type="checkbox"/> Certified Designs:			
<b>CERTIFIER NAME</b>	Mark Glover	 <b>Email: gasdirect@xtra.co.nz</b> <b>Ph: 021 355 660</b>	
<b>REGISTRATION TYPE &amp; NUMBER</b>	Certifying Gasfitter-Registration No.11502		
<b>SIGNATURE</b>			
<b>DATE</b>	20/12/2024		