

HEATING APPLIANCE* INSTALLATION COMPLIANCE CERTIFICATE

Regulation 30

(* A stove, heater or simila	ar appliance that burns oil or solid fuel)				
To:			Permit Authority	F A	
			Address	Form 54	
			 Suburb/postcode		
Details of installa	ation:				
Address:			(address of installation)		
			,	,	
(X the applicable box.)					
new:	second-hand: replacement:	freestanding:	built-in:	flue only:	
Appliance type:			Fuel us	ed:	
Make:			Model N	No.:	
Manufacturer:			AS 2918- tested:	yes: no:	
Address:			Compliance Cert.	No.	
			Emission Cert.	No.	
Flue type:		Hearth type:			
Owner/Installer of	letails:				
Owner:			Contact		
			person:		
Address:			Phone No:		
			Fax No:		
Email address:					
Installer:					
Address:			Phone No:		
			Fax No:		
Registration No. (if applicable):		Email address:			
Notification and	Certification details:				

I certify that the installation of the heating appliance referred to above, has been carried out in accordance with the National Construction Code.

Note: this notification must be supplied to the Permit Authority within 7 days of the installation.

(Delete one not applicable)	Name: [print]	Signed		_	Date	
Owner/Installer:						

Form No: I&DS.BLD.018