



# NOTICE OF INTENT

This Notice should be duly completed and sent to the relevant gas supplier at the project planning/design phase and well before the work is commenced (six weeks minimum where possible), if any complex installation type listed applies. It is to be submitted on a voluntary basis until the Gas Standards (Gasfitting and Consumer Gas Installations) Regulations 1999 mandate such a requirement.

## 1 COMPLEX INSTALLATION TYPE (Please mark appropriate boxes. Only if a box is marked, send completed Notice to gas supplier)

Multi-residential (16+)     Multi-storey (3+)     Consumer piping nom. size greater than 32mm     Class I     Gas rate greater than 1,000MJ/h

## 2 DETAILS OF INSTALLATION AND GAS SUPPLIER

Owner/Occupier name:				Builder's Name:			
Phone/Fax:				Phone/Fax:			
Email:				Email:			
Lot No.	Unit No.	Street No.	Street name		Suburb/Town	Postcode	
Directions (please provide sufficient information)							
Gas supplier (name)		Meter No. (if existing)		Proposed commencement date		Proposed completion date	

## 3 FIXED INSTALLATION DETAILS (Please mark appropriate boxes. For 'other', state gas type and operating pressure.)

Gas type:	<input type="checkbox"/> NG	<input type="checkbox"/> LP GAS	<input type="checkbox"/> OTHER:
Operating pressure (kPa):	<input type="checkbox"/> 1.25	<input type="checkbox"/> 2.75	<input type="checkbox"/> OTHER:

## 4 GASFITTING WORK (Please mark appropriate boxes.)

<input type="checkbox"/> NEW	<input type="checkbox"/> PIPE WORK	<input type="checkbox"/> INSTALLATION	<input type="checkbox"/> COMMENCED SUPPLY
<input type="checkbox"/> ADDITIONAL	<input type="checkbox"/> APPLIANCE	<input type="checkbox"/> COMMISSIONING	<input type="checkbox"/> REPAIR

5 TYPE A (DOMESTIC/COMMERCIAL) APPLIANCES				6 TYPE B (INDUSTRIAL) APPLIANCES	
Description	No	Make/Model	MJ/h	DESCRIPTION:	
WATER HEATER				GAS RATE (MJ/h):	
COOKING APPLIANCE				<input type="checkbox"/> PRE ASSEMBLED	
SPACE HEATER				<input type="checkbox"/> ASSEMBLED ON SITE	
BAYONET				<input type="checkbox"/> CONVERSION	
SPA/POOL HEATER				TYPE B GAS INSPECTOR NO.: GI	
OTHER					

## 7

**COMPLETE AND SUBMIT THIS NOTICE ONLY IF A "COMPLEX INSTALLATION TYPE" IS APPLICABLE.**

## 8 GENERAL INFORMATION (Please mark appropriate boxes. If "yes" marked provide details.)

Any comments or details (include likely or used variation/exemption or dispensation)?     Yes     No    .....

Does any part of the existing gas installation not comply with the regulations?     Yes     No    .....

### 9 'COMPLEX INSTALLATION TYPE' – meanings:

- 'Multi-residential' – A development having 16 or more sole occupancy units.
- Multi-storey – Means three (3) or more storeys, excluding mezzanine or parking areas.
- 'Consumer piping nom. size greater than 32mm' – Piping of nominal diameter greater than 32mm.
- 'Class I' – An industrial/commercial gas installation containing a Type B gas appliance.
- 'Gas rate greater than 1,000 MJ/h' – The total nominal gas consumption of all installed appliances exceeds 1,000 MJ/h.

### 10 DECLARATION OF SUBMITTER OF NOTICE OF INTENT

Name: .....

Business Name: .....

Business or residential address: .....

Phone/Facsimile Number: .....

Email Address: .....

Registered Gas fitter's details (Complete if applicable):  
 No. : GF ..... Class(es): .....

I declare that it is intended to carry out gasfitting work which is the subject of this notice in accordance with the *Gas Standards Act 1972* and its regulations.

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SUBMITTER'S SIGNATURE DATE