

Annexure 1
DEPARTMENT OF LABOUR
OCCUPATIONAL HEALTH AND SAFETY ACT, 1993
CERTIFICATE OF COMPLIANCE



Certificate of compliance in accordance with regulation 7(1) of the Electrical Installation Regulations, 2009.

CERTIFICATE NO.

ECB

Certificate type (tick appropriate block)

Initial Certificate ☐

Supplementary Certificate ☐

Supplement No.: to Initial Certificate No.: as issued on:

Identification of the relevant electrical installation

(Address or other unique reference, where applicable)

Physical address:

Name of building: GPS Co-ordinates:

Suburb / Township: Pole number:

District / Town / City: Erf / Lot No:

Declaration by registered person

I, (ID No.:)

a registered person declare that I have personally carried out the inspection and testing of the electrical installation described in the attached test report as per the requirements of:

a) electrical installation regulations 9(2) (a); (new electrical installation); or ☐

b) electrical installation regulations 9(2) (b); (existing electrical installation); or ☐

(Tick appropriate box)

c) electrical installation regulations 9(2) (c); (new part to existing installation) ☐

and deem the installation to be reasonably safe when properly used.

I have entered the number of this certificate on the attached test report(s).

I declare that the persons responsible for the design, specification, procurement, construction commissioning and inspection and test have completed the relevant sections of the test report.

Registered person registration number: Date of registration:

Type of registration: **(Tick appropriate box)**

Tester for Single Phase ☐

Installation Electrician ☐

Master Installation Electrician ☐

Signature: Date:

Contact details of registered person:

Address:

Tel. No.: Fax No.:

Cell No.: Email:

NOTE: 1. This certificate is not valid unless all the sections have been completed correctly and the test report in the format approved by the chief inspector is attached.
 2. This certificate will be invalid if any corrections have been made.

Declaration by electrical contractor

I, (ID No.:)

declare that the electrical installation has been carried out in accordance with the requirements of the Occupational Health and Safety Act, 1993, and regulations made thereunder.

Electrical contractor registration number: Date of registration:

Signature: Date:

Contact details of electrical contractor: Name:

Address:

Tel. No.: Fax No.:

Cell No.: Email:



Recipient Name: Signature: Date:

Certificate Of Compliance (CoC) No. ECB
DB/Supply No:
Date of Issue:
IMPORTANT NOTE: SOUTH AFRICAN LEGISLATION STATES THE USER OR LESSOR IS RESPONSIBLE FOR THE SAFETY, SAFE USE AND MAINTENANCE OF AN ELECTRICAL INSTALLATION.

NOTE 1 - This report covers only the part of the installation described in Section 3.

NOTE 4 - Enter the required information or tick the appropriate block.

NOTE 2 - This report covers the circuits for fixed appliances but not the actual appliances.

NOTE 5 - It is suggested that the CoC Number be attached to the distribution board (DB).

NOTE 3 - Medical and hazardous user locations require additional test reports (see 8.7).

NOTE 6 - Regulations are not made retrospective.

NOTE 7 - In most circumstances this test report should be accompanied by annex pages for circuits, earth continuity and ideally wiring diagrams and photographs. Please query if not the case.

SECTION 1 - LOCATION Only required if not provided on Certificate of Compliance

Physical address:

Name of building and/or location of installation:

SECTION 2 - ABOUT THE INSTALLATION

Type of electrical installation system	<input type="checkbox"/> Permanent Installation <input type="checkbox"/> TN-S <input type="checkbox"/> TN-C-S		<input type="checkbox"/> Temporary Installation <input type="checkbox"/> TN-C <input type="checkbox"/> TT		<input type="checkbox"/> Common area for multiple users (sectional title) <input type="checkbox"/> IT <input type="checkbox"/> Supplier's earth is functional	
Characteristics of supply	Voltage 230 400 Frequency 50Hz Other Number of phases One Two Three Phase rotation Clockwise Anti clockwise NA		525 Other: Volts Hz D.C.			
Main switch type	<input type="checkbox"/> Switch Disconnector (on-load Isolator) <input type="checkbox"/> Fused Switch		<input type="checkbox"/> Circuit Breaker <input type="checkbox"/> Earth Leakage Circuit Breaker		<input type="checkbox"/> Earth Leakage Switch Disconnector	
Number of poles	Current rating		Amps Short circuit/withstand rating		kAmps	
Rated earth leakage tripping current $I_{\Delta n}$	30 mA Other		mA			
Is surge protection installed? (see 6.7.6 and annex I)	Yes No		No			
Is lightning protection installed? (see 6.7.6 and annex I)	Yes No		No		If applicable, complete Table I.10 Lightning protection system installation safety report.	
Is an alternative power supply installed? (see 7.12)	Yes No		No		If Yes Generator kVA &/or UPS kVA	
Is any part of installation a specialised electrical installation?	Yes No		No		If yes, complete additional specialised test report (see 8.7 of SANS 10142-1 - Wiring of Premises)	
Is any part of the installation at a voltage above 1 kV	Yes No		No		If yes, competent person must approve design and additional test reports (see 8.5.3 and SANS 10142-2)	

SECTION 3 - DESCRIPTION OF INSTALLATION COVERED BY THIS REPORT Include annex pages for additional notes, specification references, wiring drawings, etc. to represent all applicable information of work done.

NUMBER OF CIRCUITS OR POINTS		New	Existing	NUMBER OF APPLIANCES, EARTH LEAKAGE & OTHER		New	Existing	
Lighting circuits				Fixed appliance circuits	Cooking			
Lighting points					Geyser			
Socket outlet circuits					Pool pump			
Socket outlets					Borehole pump			
					Other			
Transformer circuits	Lighting			Other circuits or points				
	Bell			Other circuits or points				
	Other			No. of socket outlets protected by earth leakage				
Air-conditioning circuits				The Earth Leakage	The complete installation (Yes/No)			
Heating circuits				Protects:	Only partial installation (Yes/No)			
Fan circuits				Is there photographic evidence? (at least of the DB)				
Alternative power supply connections					Before work started		After work completed	

IMPORTANT NOTE: Items not listed must not be ignored and must be an annex page to this test report. Contact the ECB for annex page templates.

SECTION 4 - INSPECTION AND TESTING OF NEW AND EXISTING INSTALLATIONS Annex pages are likely needed to accompany the test information below

- Conductors are of the correct rating and current-carrying capacity for the protective devices and connected load Yes No N/A
- Components have been correctly selected and installed Yes No N/A
- Disconnecting devices are correctly located and all switchgear correctly switches the phase conductors Yes No N/A
- Circuits, fuses, switches, terminals, earth leakage units, circuit breakers, distribution boards are correctly and permanently marked or labelled Yes No N/A

TESTS	UNITS	READING	INSTRUMENT	IS COMPLIANT?
1. Continuity of bonding	Ω			Compliant N/A
2. Resistance of earth continuity conductor at ALL points of consumption: (use annex pages to list all)	Ω			Compliant N/A
3. Continuity of ring circuits: (use annex page if applicable)	-			N/A
4. Earth loop impedance test at main or local switch: (use annex page if applicable)	Ω			N/A
5. Neutral loop impedance test at main or local switch: (use annex page if applicable)	Ω			N/A
6. Prospective short circuit current at main or local switch (PSCC) (use annex page if applicable)	kA			N/A
7. Elevated voltage between incoming neutral and external earth: (ground) (apply load, measure and record)	V			Calculated or Measured
8. Insulation resistance:	MΩ			
9. Voltage at distribution board with no load for each phase to neutral:	V			
10. Voltage at distribution board with load (as calculated for full load) for each phase to neutral	V			
11. Record value of operation of earth leakage units: (record tripping current)	mA			
12. Operation of earth leakage test button: (test button)	Correct			
13. Polarity of points of consumption: (check every socket for correct polarity)	Correct	N/A		
14. Phase rotation is consistent at points all of consumption for three-phase systems:	Correct	N/A		
15. All switching devices, make-and-break circuits: (function test)	Correct			

Other comments pertaining to this project/test report:

SECTION 5 - RESPONSIBILITY, INSPECTION AND TESTS When relevant, include other responsible parties & signatures in an annex pages or take full responsibility.

of annex pages

I, being the person responsible for the INSPECTION AND TESTING of the electrical installation, particulars of which are listed in section 3 of this form, CERTIFY that the inspection and testing were done in accordance with this part of SANS 10142, that the results obtained and reflected on this report and annex pages are correct and indicate the extent of the liability of the signatory is limited to the installation described in Section 3 of this form.

Full name of registered person:

Signature:

Date:

ID number:

Registration Certificate No.

Date of registration:

AC ELECTRICAL
082 969 8842
info.acelectrical@gmail.com
Broodboom Street
Kull's River

Email:

☐ Electrical Tester for Single Phase (ETSP)

☐ Installation Electrician (IE)

☐ Master Installation Electrician (MIE)