

Gas Safety Report

Contact Details

Completed by: PIC Building Services	Inspection Date: 17/09/2022
Technician: Benjamin Cheng	Licence No: 108 316
Business Address: 100 Spring St Nth, Port Melbourne VIC 3207	Telephone: 0487 088 227

Property Details

Address: 68 Guinevere Parade, Glen Waverley, VIC, 3150
Owner/Rental Provider: Arshdeep Singh
Real Estate Agent: Harcourts Judd White

Remedial Action Required

	Details of identified faults	Remedial action to be taken
1		
2		
3		
4		

Declaration

I, being the person responsible for the inspection of the identified gas appliances and/or installations in the property mentioned above, particulars of which are described here, having exercised reasonable skill and care when carrying out the inspection, hereby declare on the date of inspection that the information in this report, including the observations and recommendations, provides an accurate assessment of the condition of the property gas appliances and/or installations taking into account the stated extent of the installation and the limitations of the inspection and testing. No responsibility will be assumed for the condition of the installation or operation of the appliances after the date of inspection.

I further declare that in my judgment, the said appliance and/or installation is:

- ☒ Compliant – gas appliance or gas installation complies with AS/NZS 5601 or AS 5601 as appropriate.
- ☐ Remedial work is required – no immediate risk, however remedial work is required to be carried out within three months to bring the gas appliance or installation up to standard.
- ☐ Non-compliant – gas appliance or gas installation is unsafe and requires disconnection and urgent work as the safety of persons may be at risk or there may be damage to property.

Safety Check

CONSUMER PIPING PRESSURE TEST

Test Pressure: 1.7KPa

Test Duration: 5 mins

Test Result: Pass

COMBUSTION SPILLAGE TEST (ONLY APPLICABLE FOR INDOOR FLUED APPLIANCES)

Negative Pressure/ Smoke Test	Exhaust Fans Off	Exhaust Fans On
	<input type="checkbox"/> <u>No</u> reverse flow observed <input type="checkbox"/> Reverse flow observed	<input type="checkbox"/> <u>No</u> reverse flow observed <input type="checkbox"/> Reverse flow observed
CARBON MONOXIDE TEST	Exhaust Fans Off (ppm)	Exhaust Fans On (ppm)
Background check – initial CO level	0	0
5 minute check – CO reading (metal flue)	0	0
10 minute check – CO reading (brick or masonry chimney)	N/A	N/A
Background check – final CO level	0	0

APPLIANCES

Appliance: Bellini gas cooktop		Appliance: Rheem optima storage hot water service	
Appliance correctly installed and restrained	✓ Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Appliance correctly installed and restrained	✓ Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Data/compliance plate is visible	✓ Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Data/compliance plate is visible	✓ Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Main burner and pilot flame normal	✓ Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Main burner and pilot flame normal	✓ Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Nominal burner pressure correct	✓ Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Nominal burner pressure correct	✓ Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Appliance regulator accessible	✓ Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Appliance regulator accessible	✓ Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Cowl/chimney/flue in good condition	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Cowl/chimney/flue in good condition	✓ Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Flue adequately supported	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Flue adequately supported	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Appropriate clearances from combustible surfaces	✓ Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Appropriate clearances from combustible surfaces	✓ Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Room adequately ventilated	✓ Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Room adequately ventilated	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Notes:		Notes:	

APPLIANCES CONTINUED			
Appliance: Braemar TQ330NG ducted heater		Appliance:	
Appliance correctly installed and restrained	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Appliance correctly installed and restrained	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Data/compliance plate is visible	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Data/compliance plate is visible	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Main burner and pilot flame normal	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Main burner and pilot flame normal	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Nominal burner pressure correct	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Nominal burner pressure correct	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Appliance regulator accessible	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Appliance regulator accessible	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Cowl/chimney/flue in good condition	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Cowl/chimney/flue in good condition	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Flue adequately supported	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Flue adequately supported	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Appropriate clearances from combustible surfaces	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Appropriate clearances from combustible surfaces	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Room adequately ventilated	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	Room adequately ventilated	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Notes:		Notes:	

APPLIANCES CONTINUED			
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Appliance correctly installed and restrained	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Appliance correctly installed and restrained	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Data/compliance plate is visible	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Data/compliance plate is visible	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
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Flue adequately supported	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Flue adequately supported	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Appropriate clearances from combustible surfaces	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Appropriate clearances from combustible surfaces	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Room adequately ventilated	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Room adequately ventilated	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Notes:		Notes:	