



**Esperance**  
Gas Distribution Company

**CLASS "I" GAS INSTALLATIONS  
AUDIT CHECK LIST  
C9906a67**

Company:	Address:	
Contact Name:	Contact Phone No:	
Meter Number:	Meter Index:	
Meter Working Pressure:	Meter Location:	
Appliance/s		
<b>INSPECTION / RE-INSPECTION DETAILS</b>	<b>Cross out as applicable</b>	<b>Re-Inspection</b>
Meter location complied with regulation and supplier requirements	Y/N	Y/N
Appliance location complies with regulations and supplier requirements	Y/N	Y/N
Pipework is of sufficient size for the supply parameters	Y/N	Y/N
Approved pipework and materials are used	Y/N	Y/N
Pipework secure in accordance with regulation	Y/N	Y/N
Appliance has been correctly installed	Y/N	Y/N
Installation is pressure tested for leaks	Y/N	Y/N
Appliance isolation valves fitted and accessible	Y/N	Y/N
Flueing and ventilation requirements are met	Y/N	Y/N
Compliance Badge(s) affixed to the installation	Y/N	Y/N
Inspection Complete and installation Compliant	Y/N	Y/N
Permanent Gas Supply Authorised	Y/N	Y/N
<b>Appliance Connection NOC</b>		<b>Commissioning NOC</b>
<b>Gas Fitter Name</b>		<b>Gas Fitter Name</b>
<b>Gas Fitter No.</b>		<b>Gas Fitter No.</b>
<b>License restrictions/class</b>		<b>License restrictions/class</b>
<b>Type "B" Inspector Name</b>		<b>"B" Inspector Number</b>
<b>Brief Summary of Inspection Details:</b>		
<b>Inspection Date:</b>	<b>Inspector's Name:</b>	
<b>Signature:</b>	<b>Inspector No:</b>	
<b>Re-Inspection Date:</b>	<b>Inspector's Name:</b>	
<b>Signature:</b>	<b>Inspector No:</b>	