

CERTIFICATE OF ELECTRICAL SAFETY

Electricity Safety Act 1971 Section 6
Phone: (02) 6207 7775 Fax: (02) 6205 4510

Fax: (02) 6205 4510



-			(62) 6267			(02) 020			PCT GOVERNMENT
Part 1: Installation owner details Name of installation owner Phone									
Building ID									
Street Address									le
							<u> </u>		
Is a certificate of occupancy required? No. Yes. If Yes, building project number must be supplied:									
Part 2: Category Please tick one box			☐ Commercial						
Part 3: Type of Work Please tick one box	☐ Ne	w	☐ Temporary Supply ☐ Permanent/Temporary Su				☐ Repair y		
Part 4: Installation Tick as applicable			☐ Street lights ☐ Traffic lights ☐ Public lights	☐ External lighting ☐ Soft wiring ☐ Solar PV		ing	☐ Hazardous location☐ Schools and child care☐ Medical and health care	e D	Swimming pool Spa or hot tub Safety services
Part 5: Work Load Details									
Item	QTY		Item	QTY		Load KW	Item	QTY	Load KW
Ligi	hts		Hot plates				Street light	ts	
Ceiling fa	ins		Wall oven				Smoke detector	rs	
10A single socket-outle	ets		Range				Circuits for pool equipmen	nt	
10A double socket-outle	ets		Storage hot water				Pool heate	er	
10A multiple socket-outle	ets	In	stantaneous hot water				Spa or Hot tu	ıb	
15A & 20A socket-outle	ets		Off peak hot water				Saun	ıa	
3 phase socket-outle	ets	E	Electric solar hot water				Air conditionin	ıg	
Other socket-outle	ets		Direct heating				Motor	rs	
Exhaust fa	ıns		Off peak heating				Altamatica anamana	Qty	Supply KW
Safety switch	nes		Fan light heater				Alternative energy supply (AES)		
☐ Consumer mainsmm² ☐ Main switchboard ☐ Distribution board								rd	
Main earth location Equipotential earth bond locations									
Other load details (if insuffici	ent space	please at	tach list)						
Part 6: Certification					l inc	TALLED BY	v		
WORK TESTED BY (Details of the electrical contractor or unre									
Unrestricted electrician installation covered by Name									
COLA licence No									
Signature									
To: Construction Occupations Registrar. I hereby notify that the electrical wiring work described in this report has been tested in accordance with AS/NZS 3017 by the following persons and complies with AS/NZS 3000 Wiring Rules (The tester must sign this certification).									
OFFICE USE ONLY									
E					I	N S	Р		
Defect report / Seal ID	No		[□Re	inspe	ection fee	required		

☐ Passed

Date___/_

Inspector remarks:

Signature.....