

# Individual Type A Gas Device Approval Application

Date: \_\_\_\_\_

## DETAILS OF APPLICANT

**COMPANY OR INDIVIDUAL NAME:** \_\_\_\_\_

**CONTACT NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**COMPANY A.B.N.:** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

**LOCATION TO BE GAS APPROVED:** \_\_\_\_\_

**LOCATION TO BE INSTALLED:** \_\_\_\_\_

**AUTHORISED PERSON MAKING THIS APPLICATION:** \_\_\_\_\_

## AUTHORISATION

I hereby apply for this appliance to be tested in accordance with the safety requirements for gas devices (Type A). As detailed under s733 of the Petroleum and Gas (Production and Safety) Act 2004.

**PRINT NAME OF CUSTOMER:** \_\_\_\_\_

**APPLICATION DATE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

<b>APPLIANCE DETAILS</b>	
<b>APPLIANCE :</b> COMMERCIAL DOMESTIC	<b>INSTALLATION INSTRUCTIONS SUPPLIED?</b>
<b>MAKE:</b>	<b>HAS THE APPLIANCE BEEN INSTALLED?</b>
<b>MODEL:</b>	<b>SPECIFICATIONS SUPPLIED:</b>
<b>SERIAL NO:</b>	<b>COUNTRY OF ORIGIN:</b>
<b>GAS CONSUMPTION:</b>	<b>MANUFACTURED BY:</b>
<b>INJECTOR SIZE/S:</b>	<b>EQUIPMENT:</b>
<b>GAS TYPE/S:</b> PROPANE NATURAL UNIVERSAL LP	<b>COPY OF MANUAL SUPPLIED WITH APPLICATION?</b>
	<b>NAMEPLATE ON UNIT?</b>