

Gas System Compliance Certificate

Petroleum and Gas (Production and Safety) Act 2004



Queensland
Government

Petroleum and Gas Inspectorate

Owner, operator or proposed operator

1724596

Full name: FORTITUDE HOMES
Address: 17 BUSBYCKER DR NARAYANGA CLOT 704
Email:

Gas system details

Location:	HOUSE		
Device:	HWS		
Device make:	KUEHN		
Device model:	87082017		
Serial number:	43-1122900089		
Approval number:	85254		
Gas device type:	<input checked="" type="checkbox"/> A / <input type="checkbox"/> B	<input type="checkbox"/> A / <input type="checkbox"/> B	<input checked="" type="checkbox"/> A / <input type="checkbox"/> B
Gas capacity:	127 MJ/hr		38.3 MJ/hr
Operating pressure:	3.0 kPa		3.0 kPa
Commissioned:	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	<input type="checkbox"/> Yes / <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No
Instructions provided:	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	<input type="checkbox"/> Yes / <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No
Fuel gas:	<input type="checkbox"/> Natural gas <input checked="" type="checkbox"/> LPG <input type="checkbox"/> Biogas <input type="checkbox"/> Syngas <input type="checkbox"/> Other:		
Fuel gas supplier:	<input type="checkbox"/> Self-supply <input checked="" type="checkbox"/> Supplier:		
Supply type:	<input checked="" type="checkbox"/> Exchange <input type="checkbox"/> In-situ fill <input type="checkbox"/> Network <input type="checkbox"/> Other:		
Supply pressure:	3.0 kPa (supply) / kPa (second stage regulator if a two-stage system)		

Gas work details

Date completed: 03/05/23
Work completed: ☒ Installed gas system

- ☐ Installed or altered part of existing gas system (including decommissioning)
☐ Certified existing gas system under s113 Petroleum and Gas (Safety) Regulation 2018

Description of gas work (include a diagram if appropriate):

X2 45 kg Bottles to supply	
HWS & CKTOP ONLY	

Certification

- ☒ I certify that the gas system and any gas work, as detailed above, complies with all relevant safety requirements.
☒ I have ensured a compliance plate is attached and/or has been updated.
☐ I have advised the owner, operator, or proposed operator, in relation to the safe operation of the gas system.

GWL / GWA #: 129362
Full name: EDWARD LLOYD JONES
Signature:
Date: 03/05/23

Telephone: 0433 296 016
Email:

Please note that nothing in this document shall be regarded as in any way relieving you from compliance with the Petroleum and Gas (Production and Safety) Act 2004.

WARNING

DO NOT USE UNLESS BUILDING IS
USE OF OWNER KEY WILL CANCEL PR

VT: -

RESS: -

PING: -

BUILDER: -

Customer Order:

S1850080

Home Owners Keys

Stamping: 1-240 ✓

Builder:
FORTITUDE HOMES

Address:

LOT 704 BUSHTUCKER DV

Date: 12/10/22

ASSA ABLOY



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Queensland
Government

Petroleum and Gas Inspectorate

Owner, operator or proposed operator

1724596

Full name:	FORTITUDE HOMER	Telephone:	
Address:	17 BUSBUCKER DR NAZANUNGA CLOT 704		
Email:			

Gas system details

Location:	HOUSE			
Device:	HWS		CKTOP	
Device make:	KREEM		FRANKE	
Device model:	82082017		FR490551	
Serial number:	A13-1122900089		2022510026	
Approval number:	85254		10446	
Gas device type:	<input checked="" type="checkbox"/> A / <input type="checkbox"/> B	<input type="checkbox"/> A / <input type="checkbox"/> B	<input checked="" type="checkbox"/> A / <input type="checkbox"/> B	<input type="checkbox"/> A / <input type="checkbox"/> B
Gas capacity:	177 MJ/hr		38.3 MJ/hr	
Operating pressure:	3.0 kPa		3.0 kPa	
Commissioned:	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	<input type="checkbox"/> Yes / <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	<input type="checkbox"/> Yes / <input type="checkbox"/> No
Instructions provided:	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	<input type="checkbox"/> Yes / <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	<input type="checkbox"/> Yes / <input type="checkbox"/> No
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