## HETAS

## HETAS - COMMISSIONING SHEET

* indicates	required field for HETAS notification		
Your Reference		Completion date*	10/1/2 /2 24
Customer Name	MIS- NIC C: 11-16		8/Jan/2024.
Installation Address*	Mr & Mrs Giblelle 7, Cao Grava		
	Thornhill		
Postcode*	CA, any	Contact number/em-11*	-2 12 11.70
Installing Company*	Mark 1		02920 811478
Installing Engineer Name*	June Delinenth	Company HETAS Reg. No.*	
	AND STREET, STREET, SHOW AND STREET, S	Installer HETAS Reg. No.*	10558
Does the installation replace an existing appliance? Electric Gas Gil S/F New Heat Source			
Location lounge -			
Appliance Make* Chill: Brown Model* Wood Model* Wood Make*			
Appliance Make* Chill: Brown Model* Woody  Appliance Type closed Specified Fuel Multiple Defra Exempt  System Type*  Other-please specify  Heat Output*  Defra Exempt  Ves No			
System Type* New Heating & Hot Water Updated Existing Heating & Hot Water Dry only			
Chimney* Evicting 🗆			
Construction Type Sectional Flue dimension 125 mm 'Designation' 7450 NIWIV2150040 G			
Hearth Hearth / Surround  New / Existing (Delete as appropriate)  Fireguard?  Yes (No)			
Air supply Are permanent open air vents available? Ves (No)  Dedicated air supply 2			
2 see separate commissioning sheet if Yes			
TESTING & COMMISSIONING INCLUDING APPROVED DOC J, APPENDIX E  Visual inspection			
Check socket joints and seals on the flue and appliance			
An approved Carbon Monoxide alarm has been fitted; Location Dining Rom Near			
Test flue including satisfactory Smoke Draw Test (Smoke Test II), Flue Draught Interference Test; include flue draught reading  Spillage Refuel Test performs 1:			
Spillage Refuel Test performed in accordance with available guidance (as appropriate)  Spillage Refuel Test performed in accordance with available guidance (as appropriate)			
Instruct user on correct types of fuels and fuel storage			
Instruct user on essential maintenance and in particular regular chimney sweeping			
Hand over user instructions & Demonstrate appliance operation and all controls to the user			
Ensure that a Notice Plate has been completed and fixed in position  For boiler installations: appropriate safety devices installed/checked & system commissioned in accordance with manufacturers guidelines			
For boller installations: appropr	iate safety devices installed/checked & syst	tem commissioned in accordance v	vith manufacturers guidelines
NB: This commissioning sheet do	nes not constitute a Naticali	DE LA CONTRACTION DEL CONTRACTION DE LA CONTRACT	A TO THE REAL PROPERTY OF THE PARTY OF THE P
			st be followed & completed.
as required by Building Regulations			
	DECLARATION OF COMM	IISSIONING *	
As the competent person respondence with	nsible for the work described above, I h the HETAS rules of registration, and	confirm that the appliance an	d associated work has
Regulations in force and manufa	h the HETAS rules of registration, and rer's instructions.	I that the work complies with a	all appropriate Building
Signed*		THE PROPERTY OF THE PARTY OF TH	
	Fillit Name*	J.PartsnowTH.	Date* 8 Jan 2034
CUSTOMER HANDOVER			
As the appliance end user(s) I/We confirm the Installer has given advice on:			
Appliance use, controls & relevant safety/installation information e.g. CO Alarm			
Importance of regular maintenance  Importance of appropriate approved fuel			
Importance of appropriate approved fuel			
Signed	Print Name	J. GIBLETTE	Date 9 1 2001
L. L. Cavern House Unit 5 Newto			Date 8 1 2024