

HEATING APPLIANCE INSTALLATION NOTIFICATION

Regulation 50

To: Permit Authority
 Address
 Suburb/postcode

Form **53**

Owner/installer details:

Owner:
Address: Phone No:
 Fax No:
Email address:

Installer:
Address: Phone No:
 Fax No:
Registration No. if applicable: Email address:

Details of installation:

Address: (address of proposed installation)

(X the applicable box.)
new: second-hand: replacement: freestanding: built-in: flue only:

Appliance type: fuel used:
Make: model No.:
(X the applicable box.)
Manufacturer: AS 2918- tested: yes: no:
Address: compliance cert. No.
 emission cert. No.
Flue type: hearth type:

Notification details:

This heating appliance is intended to be installed at the above address on: Date:

Note: Minimum two days notification must be given prior to installation.

(Delete one not applicable) Name: [print] Signed Date
Owner/Installer: