

Notification to commence gas works

Use this form to notify NT WorkSafe of the commencement of gas works on fuel gas systems when:

- The fuel gas stored in a gas container/s is more than 200kg; or
- The fuel gas system is connected to a gas main and the total gas consumption is more than 200MJ per hour.

NT WorkSafe must be notified no later than 24 hours prior to commencement of work or, in an emergency, as soon as practicable.

1. Commencement date

Work will commence on:	
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2. Business details

Business name:		ABN:	
Contact person:			
Postal address:			
Suburb:		State:	
		Postcode:	
Phone number:		Mobile number:	
Email address:			

3. Gasfitter details

Gasfitter name:		Licence number:	
Postal address:			
Mobile number:		Email address:	

4. Gas works location

Address of premise or caravan:			
Owner name:			
Shop name: (if applicable)			
Mobile number:		Email address:	

5. Nature of work

New installation	<input type="checkbox"/>	Addition	<input type="checkbox"/>	Alteration	<input type="checkbox"/>	Repair	<input type="checkbox"/>
Installation of gas container/s	<input type="checkbox"/>	Installation type 'B'	<input type="checkbox"/>	Installation or repair of gas appliance	<input type="checkbox"/>	Removal	<input type="checkbox"/>

6. Type of installation

Industrial	<input type="checkbox"/>	Commercial	<input type="checkbox"/>	Domestic	<input type="checkbox"/>	Dispensing	<input type="checkbox"/>	Bulk storage	<input type="checkbox"/>
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7. Gas withdrawal

Liquid	<input type="checkbox"/>	Low pressure vapour	<input type="checkbox"/>	High pressure vapour	<input type="checkbox"/>
Details of work pressure:					

8. Type of gas

LP gas	<input type="checkbox"/>	Low pressure vapour	<input type="checkbox"/>
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9. Gas source

Gas main <input type="checkbox"/>	Bulk storage <input type="checkbox"/>
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10. What is the gas system being used for and what is it connected to? e.g. stove, boiler, turbine

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11. Piping sizing

Gas usage <input type="checkbox"/>	MJ/h	Pressure drop <input type="checkbox"/>	kPa
Main run <input type="checkbox"/>	m	HP 1 st stage	kPa
Table number			

Note: if using formulae – the calculations are to be included on the plan over page.

12. Gas storage tank

Capacity	Manufacture	Serial number	Plant item No.	Expiry date

13. Gas container/s (other than a gas cylinder which is not filled on the premises)

Capacity	Manufacturer	ID number	Manufacture date	Test date or last date of re-testing

14. Compliance checklist

Tick the appropriate boxes where the work conforms to the Dangerous Goods Regulations (including AS1596, AS5601, AS3814, AS4645)			
Compound compliance <input type="checkbox"/>	Fill and excess flow value <input type="checkbox"/>	Vehicle protection <input type="checkbox"/>	
Source of ignition <input type="checkbox"/>	Combustible material <input type="checkbox"/>	Fixing of regulator and vent direction <input type="checkbox"/>	
Underground drains <input type="checkbox"/>	Safety valve(s) and relief direction <input type="checkbox"/>	Fence, dome, lock <input type="checkbox"/>	
Flammable liquid <input type="checkbox"/>	Flood area <input type="checkbox"/>	Pipe work is protected and secure <input type="checkbox"/>	
Safety shut-off system <input type="checkbox"/>	Dust caps <input type="checkbox"/>	Instructions and signs <input type="checkbox"/>	
OPSO value/meters <input type="checkbox"/>	Fire protection <input type="checkbox"/>	Correct temperature flexible hoses <input type="checkbox"/>	
Attached gas compliance plate <input type="checkbox"/>	Unused valves plugged <input type="checkbox"/>	Behind/under cooker connection/safety chain <input type="checkbox"/>	
Paint scheme – tank and fittings <input type="checkbox"/>	Issue COC <input type="checkbox"/>	Unused valves plugged <input type="checkbox"/>	
Isolation valves and over pressure protection <input type="checkbox"/>	GPO/isolation valve is adjacent location accessible to appliance <input type="checkbox"/>	Components protected from extreme temperatures <input type="checkbox"/>	

15. Site plan and the installation (attach or provide drawing below)

The applicable items from the compliance checklist must be included in the proposed installation plan including any particulars of any public places, protected works and ignition sources, adjacent or near to, and their distances from, the gas container.

[Empty box for site plan and installation drawing]

16. Notifier declaration

I the undersigned person making this notification, hereby solemnly and sincerely declare that the information made in this notification and attachments are true and correct in every particular.

I declare that the installation, operation and maintenance of this fuel gas system complies with the applicable Australian Standard.

I have submitted this form electronically (signature is not required)

Notifier signature: _____ Date: _____

Privacy statement

The Department of Attorney General and Justice complies with the Information Privacy Principles scheduled by the Information Act.

Lodgement

Complete notifications can be lodged in person, email or via post at a NT WorkSafe below:

Phone: 1800 019 115 Email: ntworksafe@nt.gov.au Postal: GPO Box 1722, Darwin NT 0801
In person: Darwin Corporate Park, Building 3 Stuart Highway, Berrimah NT