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| **ONE COPY TO OWNER • ONE COPY TO PWC • ONE COPY MAINTAINED BY CONTRACTOR FOR 5 YEARS**  The customer should retain this certificate as a form of warranty. Should you require any advice about the work set out in this form, contact the licensed electrical contractor below. Any alterations or additions to installation should be performed by an appropriately licensed person. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Contractor name: | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| PWC NIW No: | | | | | |  | | | | | Contractor invoice no: | | | | | | |  | | | | | | | | | | |
| **Installation details** – These fields are mandatory | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Customer name: | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Address – property | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Address – postal: | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Telephone (a/h): | | | | |  | | | Telephone (b/h): | | | | |  | | | | Mobile: | | | | | | | | |  | | |
| **Type of installation work** (tick appropriate boxes) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| New: | | |  | | | | Additions: | |  | | | | | Alterations: | |  | | | | | | Repairs: | | | | |  | |
| **Describe work certified –attach other sheets as required** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Non-Compliances observed on existing installation which were not repaired**  Quote Standard and Clause Number for Non-Compliance – Attach other sheets as required | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Reported to electrical safety regulator | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Electrical worker** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I, |  | | | | | | | | | | | | | | Licence No: | | | | | **A** | | | | | | | | |
| Certify that the information is complete and correct and that I have carried out all examination and tests on the electrical installation work detailed on the certificate, and the results satisfy all requirements of the *Electricity Reform Act*. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name: | |  | | | | | | | Signature: | | |  | | | | | | | | | Date: | | |  | | | | |
| **Contractor or authorised agent acting on the Contractor’s behalf** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I certify the above information is complete and correct and that I have managed the electrical work detailed above ensuring it meets the requirements of the Electricity Reform Act. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Business name: | | | |  | | | | | | | | | | | | | | | Licence No: | | | | | | **C** | | |  |
| Phone: | | | |  | | | | | | Email: | |  | | | | | | | Mobile: | | | | | |  | | | |
| Name: | | | |  | | | | | | Signature: | |  | | | | | | | Date: | | | | | |  | | | |

Refer to Information Bulletin *Certificates of Compliance – Electrical Safety* for more information regarding the issuing of certificates of compliance under the *Electricity Reform Act* and Electricity Reform (Safety and Technical) Regulations. Verification sheets are available from NT WorkSafe website.