

CERTIFICATE OF FITNESS

Ref No.: _____ (Please refer to our Notification letter)

Email: **gasils@spgroup.com.sg**

Name & Address of Premises:

Specified Gas Installation / Gas fitting:
(Please mark an "X" in the appropriate box)

- From GSIV to meter installation
- From meter installation to appliance(s)

Type of Test:
(Please mark an "X" in the appropriate box)

- Inspection
- Inspection and Soundness Test

Date of Test (DD/MM/YYYY): _____

I hereby certify that the specified gas installation / gas fitting is fit for purpose.
(Please sign within the box)



Signature of PE / LGSW

Name of PE / LGSW: _____

PE / LGSW Registration No.: _____

Please type out the fields in the form.
You may download a copy of the form at <https://www.spgroup.com.sg/resources> under Gas Works.