CERTIFICATE OF FITNESS

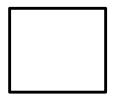
Ref No.:	(Please refer to our Notification letter)
Email: gasils@spgroup.com.sg	
Name & Address of Premises:	
Type of Test Conducted from GSIV to Applia (Please mark an "X" in the appropriate box)	nce(s):

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

Name of PE:_____

Name of PE:_____ PE Registration No.:_____