

NOTIFICATIO APPLIANCE*	N OF INTENTION TO INSTALL HE	ATING	Regulation 30
(* A stove, heater or simil	ar appliance that burns oil or solid fuel)		
To:		Permit Authority	Form 53
		Address	Form JJ
		Suburb/postcode	
Owner/installer	details:		
Owner:			
Address:		Phone No:	
		Fax No:	
	Email address:		
Installer:]	
Address:		Phone No:	
Licence No. (if app	icable): Email address:		
Details of insta	llation:		
Address:		(address of proposed installation)	
]	,
	(X the applicable box.)		
new:	second-hand: replacement: freestandin	g: built-in:	flue only:
Appliance type:		fu	el used:
Make:		_ mo	del No.:
		(X th	ne applicable box.)
Manufacturer:		AS 2918- tested:	yes: no:
Address:		compliance o	cert. No.
		emission c	cert. No.
Flue type:		_ hear	rth type:
Notification de	tails:		
This heating appl	iance is intended to be installed at the above ad	dress on:	Date:
Note: this notification must be supplied to the Permit Authority 2 days prior to installation.			
By signing I author	ise Glenorchy City Council to update my details list	ed within this for	m.
(Delete one not applicable) Owner/Installer:	Name: [print]	Signed	Date

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