

Type B Appliance Commissioning Check Sheet

Please complete in **BLOCK LETTERS**.

Details			
Client name	<input type="text"/>	Gas application number	<input type="text"/>
Client address	<input type="text"/>	Appliance type	<input type="text"/>
Applicant name	<input type="text"/>	MJ rating	<input type="text"/>
		Serial number	<input type="text"/>

Combustion analysis (AS3814 – 3.6)				
Fuel type	<input type="text"/>	Stack temp (high fire)	<input type="text"/>	
	Low fire	Mid fire	High	Pilot / start
Carbon dioxide CO ₂	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Carbon monoxide CO	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Oxygen	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Ratio CO/CO ₂	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Appliance details	
<input type="checkbox"/> Burner / control access <small>(AS3814 2.2)</small>	<input type="checkbox"/> Start gas rate <small>(AS3814 3.2.3)</small>
<input type="checkbox"/> Appliance location <small>(AS/NZS5601 6.3 / AS3814 2.1.2)</small>	<input type="checkbox"/> Start gas flame establishment period <small>(AS3814 3.2.2.3)</small>
<input type="checkbox"/> Appliance isolation valve <small>(AS/NZS5601 6.6 / AS3814 2.9.7)</small>	<input type="checkbox"/> Start gas flame proving period <small>(AS3814 3.3.1)</small>
<input type="checkbox"/> Ventilation <small>(AS/NZS5601 6.4 / AS3814 2.16) Natural / mechanical*</small>	<input type="checkbox"/> Main flame establishment period <small>(AS3814 3.3.2 (2 to 5 sec))</small>
<input type="checkbox"/> Emergency valve and sign <small>(AS/NZS5601 5.2.12)</small>	<input type="checkbox"/> Combustion air control <small>(AS3814 2.16 / 2.17/2.18)</small>
<input type="checkbox"/> Flueing <small>(AS/NZS5601 6.7/6.8/6.9) Natural / mechanical*</small>	<input type="checkbox"/> Location of pressure test points <small>(AS3814 2.13)</small>
<input type="checkbox"/> Dampers <small>(AS3814 2.19) Fixed / auto*</small>	<input type="checkbox"/> Appliance valve train <small>(AS3814 2.9)</small>
<input type="checkbox"/> Regulator and relief vents <small>(AS/NZS5601 5.11 / AS3814 2.10)</small>	<input type="checkbox"/> Clearances from combustibles <small>(AS/NZS5601 6.2.5)</small>
<input type="checkbox"/> Valve train as per submission	<input type="checkbox"/> Installation as per Schedule 9 submitted
<input type="checkbox"/> Wiring diagram supplied complies with Schedule 9(4), voltage free contacts, PLC interfaces and solid state devices.*	<input type="checkbox"/> As built schematics provided

* Delete where applicable

	Actual	Required
Purge air flow	_____ l/s @ _____ °C	_____ l/s @ _____ °C
Dilution air flow	_____ l/s @ _____ °C	_____ l/s @ _____ °C
Ventilation air flow	_____ l/s @ _____ °C	_____ l/s @ _____ °C

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Interlock check sheet

Main / pilot dry run sequence test SSOV pressure test (AS3814 3.7)	<input type="checkbox"/>				
Main	1 st Block	<input type="checkbox"/>	2 nd Block	<input type="checkbox"/>	Vent <input type="checkbox"/>
Pilot	1 st Block	<input type="checkbox"/>	2 nd Block	<input type="checkbox"/>	
SSOV System (AS3814 2.15)	Position proving	<input type="checkbox"/>	Leakage detection	<input type="checkbox"/>	CPI <input type="checkbox"/>
Mechanical ventilation interlocked (AS/NZS5601 6.4.8, 6.4.9)		<input type="checkbox"/>	Self check	<input type="checkbox"/>	Set @ <input type="text"/>
Natural ventilation (AS/NZS5601 6.4)	High	<input type="checkbox"/>	Net area	<input type="text"/>	m ²
	Low	<input type="checkbox"/>	Net area	<input type="text"/>	m ²
Main OPSO (AS3814 2.11)	Lockout	<input type="checkbox"/>	Set @	<input type="text"/>	kPa
Pilot OPSO (AS3814 2.11)	Lockout	<input type="checkbox"/>	Set @	<input type="text"/>	kPa
Regulator droop (AS3814 2.10.3)		<input type="checkbox"/>	% Pressure drop	<input type="text"/>	
Appliance operating pressure	Inlet	<input type="text"/>	Outlet	<input type="text"/>	kPa
Pilot high gas P/S (AS3814 2.11)	Lockout	<input type="checkbox"/>	Set @	<input type="text"/>	Mb
Pilot low gas P/S (AS3814 2.12)	Lockout	<input type="checkbox"/>	Set @	<input type="text"/>	Mb
Main high gas P/S (AS3814 2.11)	Lockout	<input type="checkbox"/>	Set @	<input type="text"/>	Mb
Main low gas P/S (AS3814 2.12)	Lockout	<input type="checkbox"/>	Set @	<input type="text"/>	Mb
Combustion air (AS3814 2.16, 2.20)	Trip	<input type="checkbox"/>	Self check	<input type="checkbox"/>	Set @ <input type="text"/>
Recirculation air (AS3814 2.16, 2.20)	Trip	<input type="checkbox"/>	Self check	<input type="checkbox"/>	Set @ <input type="text"/>
Exhaust air (AS3814 2.16, 2.20)	Trip	<input type="checkbox"/>	Self check	<input type="checkbox"/>	Set @ <input type="text"/>
High pressure (AS3814 3.4)	Trip	<input type="checkbox"/>	Set @	<input type="text"/>	kPa
High temperature (AS3814 3.4)	Trip	<input type="checkbox"/>	Set @	<input type="text"/>	°C
Other limits (AS3814 3.4)	Trip	<input type="checkbox"/>	Set @	<input type="text"/>	
Flame supervision (AS3814 2.25, 3.5)	Self check	<input type="checkbox"/>	Lockout	<input type="checkbox"/>	
Explosion relief to AS 1375		<input type="checkbox"/>	Size	<input type="text"/>	m ²
Special hazards	Nil	<input type="checkbox"/>	Solvents	<input type="checkbox"/>	Dusts <input type="checkbox"/>
Afterburners	Combined appliances	<input type="checkbox"/>	Flammable gases	<input type="checkbox"/>	Solid wastes <input type="checkbox"/>
Flue gas use	Hot house	<input type="checkbox"/>	Inerting	<input type="checkbox"/>	Other <input type="checkbox"/>
Other processes	Combined appliances	<input type="checkbox"/>	Flue gas use	<input type="checkbox"/>	Drying <input type="checkbox"/>
					High temp <input type="checkbox"/>

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Comments on special hazards

ESV compliance plate attached and accessible

Yes

No

Notes

Commissioning person

Full name

Signature

Date

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By signing this form, I certify that I am the person named above and this gas installation will meet the requirements of the Gas Safety Act 1997 and the Gas Safety (Gas Installation) Regulations 2008. I understand it is an offence to provide false or misleading information to Energy Safe Victoria under section 117 of the Gas Safety Act 1997.

Please return this form via email to gasapplication@esv.vic.gov.au, fax (03) 9271 5454 or via **GasTrac**