

GAS TESTING & PURGING (NON-DOMESTIC)

Optimum.

REGISTER LITHWY II	OUA AND	METEL				
Optimum Group Services p	Registered No: 123984					
Jebsen House.	Operative licence No: 4034031					
53-61 High Street,	ssued By: Haman					
Ruislip,	Print Name: N FARRANT					
Middlesex HA4 7BD	Position Held: LEAD COMBUSTION ENGWEEL					
		rosition rieid.	LCIID (O			
Job address:		Client details	if different			
Name: BROADGATE ESTATES		Name:		/		
Address: REGENTS RACE, 1,4 AND	7 TELTON	Address:	~	/		
SQUARE, LONDON			, wh			
Postcode Tel No:		Postcode				
Received By (Signature) Not AVAIVAS	KE.	Received		Tel No:		
STRENGTH TEST DETAILS		DI	PGING PROC	EDURE DETAILS		
State test method Pneumatic (P) or Hydrostatic (H)		STATE OF THE PERSON NAMED IN	AND DESCRIPTION OF THE PERSON	rried out? Yes/No	1	
Installation - New (N) - New Extension (NE) - Existing (E)						
Have components not suitable for strength testing been re	amoved		Has a written procedure for the purge been prepared? Yes/No/N/A Have 'NO SMOKING' signs etc been displayed as necessary?			
or isolated from installation as necessary (Yes/No)			Have persons in the vicinity of the purge been advised accordingly?			
Calculated strength test pressure (STP) (mbar/bar)		Have all appropriate	e valves to and from the	e section of pipe been labelled?		
Test medium - air, nitrogen, water, (hydrostatic test) etc		Where Nitrogen ga	as is being used for a	n indirect purge have the gas		
Stabilisation period (minutes)			ecked/verified for their			
Strength test duration (STD) (minutes)				in case of an incident?		
Permitted pressure drop (%STP)				safe) available? (Yes/No)		
Calculated pressure drop (mbar/bar)		Are all electrical bonds fitted as necessary?				
Findings		Calculate purge volume Gas Meter (m3)			1	
Actual pressure drop (mbar/bar)			Installation pipework & fittings (m3)			
Strength test Pass or Fail		Total purge volume (m ₃) Is gas detector/oxygen measuring device as appropriate				
TIGHTNESS TEST DETAILS		intrinsically saf		ng device as appropriate		
Gas type Natural Gas (NG) Liquefied Petroleum Gas	(LPG) NG	Findings				
Installation - New (N) New Extension (NE) Existing (E		Carry out purge no	Carry out purge noting final test criteria readings (O2% or LFL%)			
Could weather/changes in temperature affect test? You	10	Purge Pass or Fail				
Meter type (diaphragm,Rotary etc)	ROMANY					
Meter designation (U16,U40,P7 etc)	DII	是是自然	INDICATE V	VORK UNDERTAKEN:		
Meter bypass installed? Yes/No	NO	Strength test	NIA	Tightness test	V	
Installation volume (IV) Gas meter (m3)	0.0019	Purge	NA			
installation bidework & Illulius (IIIs)	2.1926					
Total IV (m3)	2-195		DECLARAT	ION OF GAS SAFETY		
Test medium - fuel, gas, air	GAS	I confirm that a	I confirm that all of the above work described on this form has be-			
Tightness test pressure (TTP) mbar/bar	21nb	satisfactorily completed in accordance with the curren		rdarge with the current Ga	as Safety	
Pressure Gauge type (water, high SG, electronic etc)		(Installation & U	Jse) Regulations	, industry standards and p	procedures.	
Maximum permitted leak rate (MPLR) m ₃ /hr	0.03	Gas Operative's Signature: Narray				
Let-by test period existing installations (minutes)	SMINS		Responsible person's signature:			
Stabilisation period (minutes)	ISMINS		Date: 28 02 18			
Tightness test duration (TTD) (minutes)	SMINS	-	Attacker When additional anish should have been personnel.			
Any inadequate ventilated areas to check? Yes / No	NO	is safe, the respon-	Attention: Where additional safety checks have been necessary to ensure the gas system is safe, the responsible person has been informed and has accepted the results, the			
Is barometric pressure correction necessary? Yes / No	NO	installation has bee	en left operational.			
Findings	7700	NO	TIEICATION OF	INSAFE CAS INSTALLA	TION	
Actual pressure drop (if any) mbar	ZELO		NOTIFICATION OF UNSAFE GAS INSTALLATION			
Actual leak rate m ₃ bar	NA	I confirm that all of the information described on this form has been satisfactorily completed in accordance with the current Gas Safety (Installation & Use) Regulations.				
Have inadequately ventilated areas been checked? Yes / No	PASS	industry standards	industry standards and procedures. However, an unsafe gas installation has been identified, details of which are listed on a seperate Warning / Advise Notice.			
Tightness test Pass or Fail	11123	Joennieo, details o		Topolato Walling 7 August 10		
		Gas Ope	rative's Signatur	e:		
A copy of this form has	Copy declined: Yes:	Responsible p	erson's signatur	e:		
been printed and handed to:	No:		Dat	e:		
handed to:	110.[_]					



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REGISTER	MEALIN (INR A-	Roamek	AND MET	ZL			
Optimum				Registered No:				
Optimum Group Services plc Jebsen House,			Operative licence No: H034031					
			ssued By: Dama					
Ruislip,			Print Name: D. FARANT					
Middlesex HA4 7BD			Position Held: LGAO COMBUSTON ENGINEEL					
				- I I I I I I I I I I I I I I I I I I I				
Job address:			(lient details it	f different			
Name: BOADGINE QUARTER			Name:					
Address: Red	GENTS PLACE, 1,4	AND 77	Terrow A	Address:				
SQUARE,	LONDON				MA			
Postcode	Tel No: _		F	Postcode				
Received By (S				Received		Tel No:		
	STRENGTH TEST DETAILS							
	eumatic (P) or Hydrostatic (H)				NAME OF TAXABLE PARTY OF TAXABLE PARTY.	DURE DETAILS		
	- New Extension (NE) - Existing	(F)		Has a risk assessment been carried out? Yes/No				
	t suitable for strength testing bee	- Annahim - Anna		Has a written procedure for the purge been prepared? Yes/No/N/A				
or isolated from insta	allation as necessary (Yes/No)	Siriemoved	/	Have 'NO SMOKING' signs etc been displayed as necessary? Have persons in the vicinity of the purge been advised accordingly?				
Calculated strength te	st pressure (STP) (mbar/bar)		/			section of pipe been labelled?		
A CONTRACTOR OF THE PARTY OF TH	ogen, water, (hydrostatic test) et	С						
Stabilisation period				Where Nitrogen gas is being used for an indirect purge cylinders been checked/verified for their correct content			/	
Strength test duration	on (STD) (minutes)			Are suitable fire exti	Are suitable fire extinguishers available in case of an incident?			
Permitted pressure	drop (%STP)			Are two way rac	dios (intrinsically s	safe) available? (Yes/No)		
Calculated pressure	drop (mbar/bar)			Are all electrical bonds fitted as necessary?				
Findings				Calculate purge volume Gas Meter (m3)				
Actual pressure drop (mbar/bar)			Installation pipework & fittings (m ₃)					
Strength test Pass o	or Fail				Total purg	ge volume (m ₃)		
TIO	NUTNESS TEST BETALLS			Is gas detector/o		g device as appropriate	/	
	SHTNESS TEST DETAILS as (NG) Liquefied Petroleum (Coo (LBC)	NG		1 (
) New Extension (NE) Existin		E	Findings				
the same of the sa	ges in temperature affect test	The same of the sa	NO	Carry out purge noting final test criteria readings (O2% or LFL%) Purge Pass or Fail			1	
Meter type (diaphrag		100/110	DIA	Turge Fass of F	1 dige i ass of i all			
Meter designation (U			4100		INDICATE WO	ORK UNDERTAKEN:		
Meter bypass installe	the state of the s		NO	Strength test	NA	Tightness test	1/	
nstallation volume (I			0.182	Purge	NIA			
	Installation pipework & fittings (n	13)	0.575					
	Total IV (m ₃)		0.757		DECLARATIO	N OF GAS SAFETY		
Test medium - fuel, g	as, air		GAS	Loopfirm that all	of the above wer	de danarihad an this e		
lightness test pressu	ure (TTP) mbar/bar		21mb	I confirm that all of the above work described on this form has been satisfactorily completed in accordance with the current Gas Safety				
ressure Gauge type	(water, high SG, electronic	etc)	HIGHSG	(Installation & Use) Regulations, industry standards and procedures.				
Maximum permitted le	eak rate (MPLR) m ₃ /hr		0.03	Gas Operative's Signature:				
et-by test period exis	sting installations (minutes)		2 MANS	Responsible person's signature:				
Stabilisation period (minutes)			ISHINS	Date: 28 2 18				
ightness test duration (TTD) (minutes)		2 MINIS						
ny inadequate ventilated areas to check? Yes / No		NO	Attention: Where additional safety checks have been necessary to ensure the gas system is safe, the responsible person has been informed and has accepted the results, the installation has been left operational.					
s barometric pressure correction necessary? Yes / No		NO						
indings			7700					
ctual pressure drop (if any) mbar		N/A	NOTIFICATION OF UNSAFE GAS INSTALLATION					
Ctual leak rate mibar		NIA	I confirm that all of the information described on this form has been satisfactorily completed in accordance with the current Gas Safety (Installation & Use) Regulations.					
ave inadequately ventilated areas been checked? Yes / No			PASS	industry standards and procedures. However an unsafe gas installation has been				
ightness test Pass or	rFail		171 -43	idenuiled, details of	which are listed on a	Seperate Warning / Advice Noti	ce.	
		1		Gas Oper	ative's Signature:			
Copy of this form has Copy declin			ed: Yes:	Responsible pe	erson's signature:			
handed to:			No:		Date:			

No: