



## CONFIRMATION OF TESTING CLASS 1 DWELLINGS ONLY

This Form is to be used for the confirmation of the Hydrostatic Test of Bathroom Fixtures connected to a Floor Waste Gully; an Internal Soil/Waste Stack, Elevated Sanitary Drain/Sanitary Plumbing; the Pressure Testing of Hot and Cold Water Rough-In Installations, Hot Water Delivery Temperature.

Location.....

Development Application No.....

Bathroom Fixtures connection to a Floor Waste Gully  
Hydrostatic Test applied without leakage

Date.....

Internal Soil/Waste Stack, Elevated Sanitary Drain/Sanitary  
Plumbing Hydrostatic Test applied without leakage

Date.....

Water Rough-In In Installation held 1500 Kpa Pressure Test

Date.....

Hot Water delivery temperature in accordance with clause  
1.9.2 AS/NZS 3500.4 2003 (Temperature..... °C)

Date.....

Print Name:.....

Signature:.....

Date:.....

Licensee's Registration No:.....

### PLUMBING TEAM:

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