

# Guide for using the Fair Trading MyInspections Gateway (Gas/Autogas Edition)

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# **1** Overview

#### 1.1 Introduction

The MyInspections Gateway has been developed and implemented by Fair Trading to allow an easy way for users to make payments and submit applications and documents in relation to functions regulated by Fair Trading.

#### 1.2 Scope

This user guide relates to the Gas and Autogas functions of the MyInspections website only, for instructions on MyInspections functions related to Plumbing and Drainage, see MyInspections user guide\_(Plumbing & Drainage Edition).

MyInspections is used for the submission of Certificate of Compliances or Certificate of Inspections for gasfitting and Autogas work across the state of NSW

### **1.3 How to access MyInspections**

To access MyInspections, open your preferred web browsing program and enter <u>https://applications.fairtrading.nsw.gov.au/MyInspections/</u> into the address bar. Then press enter (, on the keyboard).Or click on the link above.

Welcome to MyInspection - Mozilla Firefox	
Elle     Edit     View     Higtory     Bookmarks     Tools     Help       Welcome to MyInspection     +	
https://applications.fairtrading.nsw.gov.au/MyInspections/	
	Fair
	GOVERNMENT Trading



## 1.4 Information Box

Located on the top right corner of the MyInspections screen, is an information box.

This box contains text that changes as you select different fields throughout the application process to help guide you through each process.



# 1.5 Registering Your Details

New users must register their details on the MyInspection website when using it for the first time. Registering makes future applications quicker and easier by retaining your details and pre-populating them on some of the application forms.

To register, click on the **New Users Registration** tab located at the top of the MyInspections page.



Enter your details into the registration form (examples below). If you are not a licensed gasfitter or do not hold a tradespersons certificate for autogas work, you will not be able to submit a CoC or Col for gas/autogas work.



#### 1.5.1 Gasfitter

Select the Licenced Gasfitter check box under Type of User

Enter all your details into the relevant fields including *either* your individual contractor's licence No. and expiry date *or* Qualified Supervisors No. and expiry date. Only one of these licence fields can be filled out and must relate to an individual licence, not a company licence. When you have finished, click on *Register*.

Note: The passw	vord must be a r	ninimum 6 charac	ters.			
Example:		All fields	shaded yellow	are manda	itory	
Welcome to the Report	egistration Page					
Type of User:	Autogas Installer	Licenced Gasfitter	Licenced Plumber / Drainer	Other	User	
First Name:	John	Surname:	Citizen			
Plumbers/Drainers/Gasfitters Licence No:	L1234	Expiry Date:	12/12/2017			
Qualified Supervisor No:		Expiry Date:				
Unit Number:		Street Numbe	er: 10			
Street Name:	Smith	Street Type:	St			
Suburb:	PARRAMATTA	State:	NSW	Postcode:	2150	
Mobile:		Home/Office	Phone: 1300 889 0	99		
Email Address (username):	john@hotmail.com.au					
Password:					A phone num	nber in
Confirm Password:	•••••			$\sim$	one or both o	of the
					relevant field	s is
✓Register		It all required field	s with your		also mandate	ory
	detail	s then click <i>Regis</i>	ter			



### 1.5.2 Autogas Tradesperson

Select the Autogas Installer check box under Type of User

Enter all your details into the relevant fields including your Tradesperson Certificate number and expiry date. When you have finished, click on *Register*.

Example:

Welcome to the Re	egistratio	n Page	All	fields shaded y	ellow ar	e manda	tory		
Registration									
Type of User:	🖉 Autogas Insta	ller 📃 Licenced Ga	asfitte	r 📃 Licenced Plumb	oer / Drainer	Othe	r User		
First Name:	John		] :	Sumame:	Citizen				
Tradespersons Certificate No	123456		] 6	Expiry Date:	12/12/2017				
Unit Number:			\$	Street Number:	10				
Street Name:	Smith		] :	Street Type:	St				
Suburb:	PARRAMATTA		] \$	State:	NSW	Postcode:	2150		
Mobile:				Home/Office Phone:	1300 889 099	<u> </u>			
Email Address (username):	john@hotmsil.c	om.au	]			₹			
Password:			]		<u> </u>		A		
Confirm Password:	•••••		]			$\frown$	one or	both of	the
✓Register	•	Fill out all red details then o	quii clic	red fields with ye k <i>Register</i>	our		relevant also ma	fields ndatory	is



### 1.6 My Details

Once you have registered, or after logging on to the system, your details will be displayed in the My Details screen. This screen can also be accessed by clicking on the **My Details** button located under the User Details tab once logged in. If you need to change or update your details, you can do so by editing the fields that require changing on the My Details page and then clicking on **Update Details**.

MyDetails – You MyDetails	u are currently logged i	n under the below u	ser details.
			Disable Account
Type of User:	Autogas Installer 🗹 Licenced	Gasfitter 📃 Licenced Plum	nber / Drainer Other User
First Name:	John	Sumame:	Citizen
Plumbers/Drainers/ Gasfitters Licence No:	112357	Licence Expiry Date:	23/11/2019
Qualified Supervisor No:		Expiry Date:	
Tradespersons Certificate No:		Expiry Date:	
Unit Number:		Street Number:	10
Street Name:	Smith	Street Type:	Street
Suburb:	PARRAMATTA	State:	NSW Postcode: 2150
Mobile:	0411 555 555	Home/Office Phone:	
Email Address (username):	john@hotmail.com.au		
✓Updste Details ✓ Click Here to change your password Edit fields if required then click Update Details			

### 1.7 Change Your Password

To maintain the best security, it is advisable to change your password from time to time. If you want to change your password, click on the text that says "*Click Here to change your password*" on the My Details page.

The Change Password window will open as shown below. To change your password, enter your current password and your new password in the fields required and then confirm your new password. When complete, click on *Change Password*.

Change Passwor Change Password:	d
Current Password: New Password: Confirm New Password:	Change Password     Clear



# 1.8 Log in.

To log into MyInspections, enter your email address and password into the login fields where required and click *Login*.

NSW Fair Trading Home	New Users Registration	Registered User Login	
NSW Plumbin	g Inspections		
To log into MyInspectio If you are a new user a If you are an existing R	ns you must be a Register nd would like to become a legistered User please ent	red User. Registered User please : er your Username and Pa	elect the New Users Registration menu and enter your details. ssword.
User name: (account email address Password:	s)		Forgotten Password?

After clicking login, you will be taken to the My Details page(see 1.6). To continue, select the action you wish to complete.

**Note:** User Name & Password are case-sensitive and must match the details used for registration. If you enter the password incorrectly 3 times, an email containing your password will be sent to the email address you have registered with.

There has been three unsuccessful attempts to login to this account. An email has been sent to your email address with the account password.
Prevent this page from creating additional dialogs

OK



# 2 Certificate of Compliance/Inspection

### 2.1 Submit a Certificate of Compliance or Certificate of Inspection.

To submit a Certificate of Compliance (CoC) or Certificate of Inspection (Col), click on the **Submit Gas Supply CoC** button located under the **Documentation** tab.

NSW Fair Trading Home	Applications	Documentation	User Details	Logout
		Submit Notice of Work		
		Correct a Notice of Work		
		Attach Sewer Service Diagram		
		Submit Certificate of Compliance		
		Submit Gas Supply CoC		

On the next screen, read the Terms and Conditions and click the box next to "*The applicant has read the conditions*", then click the button that says "*Yes all requirements have been satisfied*".You can also print a copy of the Terms and Conditions for your records by clicking the "*Print*" button.

Submit Gas Supply Certificate of Compliance - Terms & Conditions
Requirements for Gas Supply - Licensee's Certificate of Compliance / Inspection
In order for this application to proceed you should ensure that the following requirements have been met.
Please check the appropriate boxes.
Conditions
<ol> <li>The attached Certificate of Compliance/Inspection relates to the property or vehicle as indicated and is reflective of the work undertaken.</li> </ol>
2. All Gasfitting work has been carried out by or under the immediate Supervision of an Authorised Licencee.
<ol> <li>All Autogas installations has been carried out and tested by the holder of an Authorised Tradespersons Certificate.</li> </ol>
4. You must provide a 'Certificate of Compliance/Inspection' to the person for whom the work was carried out within 5 working days after testing a gas installation following the completion of gasfitting work.
5. In the case of a gas installation that is installed in any premises (or any machine that forms part of any premises) the licensee responsible for carrying out the work, must also provide a copy of the Certificate within the 5-business day period to any person who appears to be the usual supplier of gas for use in connection with the installation if the certificate indicates that the installation is patently defective.
6. A person must not issue a certificate of inspection with respect to a gas installation that is patently defective unless the nature of the patent defect is indicated on the certificate.
The applicant has read the conditions
Yes all requirements have been satisfied Print

The Gas Supply – Licencee's Certificate of Compliance / Inspection form is a live form with fields that change based on selections by the user.

For example if "Fixed" is selected in the field labelled Installation type, no vehicle details (make, model, ect) are required, but if "Mobile" is selected in the field labelled Installation type, then fields for make, model and others are displayed under a section labelled **Vehicle Details** and any mandatory fields that are yellow must be filled out.



Madandatory (yellow) and read only (gray) fields also change depending on selections by the user.

Note: The field labelled *Certificate Type* is read only and will autopopulate as Certificate of Compliance or Certificate of Inspection based on selections of other fields in the form.

#### 2.1.1 Fixed Installation

The user should fill out the form by starting with the *Installation Type* under the **Job Type** section. Selecting Fixed Installation from the drop down list in this field will adjust the fields in the form for a fixed installation and only require input in fields related to fixed gas installations. Fixed Installation should never be selected for Autogas installations.

GAS SUPPLY - Li Certificate Type Certificate Type Job Type	icencee's Certificate of Cor	mpliance t f	Start by selecting Fixed then move through the fields of the form filling out all mandatory fields. Optional fields may also be filled out.
Installation Type: Fixed Installation: Type of Gas:	Fixed V	Mobile Installati	When Fixed is selected, <i>'Fixed</i>
Property / Vehicle Own Lot Number Deposited Plan Number: Unit Number: Street Name: Suburb: Nearest Cross Street: Owner's Full Name: Owner's Postal Address:	ner's Details   Proposed Depo: Strata Plan Nur	sited Plan Number bber Street Number Street Type [ State [ Municipality [ / Shine	Installation' field becomes mandatory, and 'Mobile Installation' field becomes read only.
Comer's Postal Address: Licencee's Defails Given Names(s) Unit Number: Street Name: Suburb: Contact Number: Qualified Supervisor Number: Licence Number: Tradesperson's Certificate Number (NVTC):	John	Sumame:	Licensee Details are auto populated from th users registered details and are read only on th form sor ate: 23/11/2019 Date



The user should select a Network Operator/ gas supplier by starting to type the suppliers name into the field supplied. As the user types into this field, suggestions appear in the list below. If the supplier doesn't appear in the drop down list, the user may select the *Other Network Operator* tick box and if known, enter an email address into the *Email Address* field.

Installation Details Type of Work: Date Work Commenced	New T	Start to type the name of the supplier/operator, then select the appropriate suggestion from the drop down list.
Gas Leak Check: Network Operator / Gas Supplier: Other Network Operator:	Yes No     No     or      origin energy	Gas Leak Check Date: 1/09/2017
Email Address:		Next

If the supplier doesn't appear in the drop down list, the user may select the *Other Network Operator* check box and if known, enter an email address into the *Email Address* field.

Installation Details				
Type of Work:	New T			
Date Work Commenced	1/09/2017	Meter Number:		
Gas Leak Check:	Yes  No	Gas Leak Check Date:	1/09/2017	
Network Operator / Gas Supplier:				
Other Network Operator:				
Email Address:	supplier@email.com			
				Next

If the suppliers email is not known, the Email Address field can be left blank, however it is the gasfitters responsibility to forward the suppliers copy of the CoC/CoI to the relevant company.

When you have finished filling out the form, click the next button.

On the next page, the user must indicate what appliances are connected to the gas installation. Insert the number of each type of appliance into the relevant field in the *Quantity Connected* column.

If the works comply, select the relevant standard it complies with under "1. The gasfitting work complies with". More than one standard can be selected.



Select the tick box next to 3. By ticking this box I certify that the installation is in safe working order" to confirm that all work is compliant. The Date will auto populate with the current date.

Appliances	, Containers and Signature		
Appliances			
Contra	Time of Anntinense Quantity		
Code	Type of Appliances Connected		Enter the number
0	Stationary engine power or air conditioner		Enter the number
1	Cooktop or wok cooker	$\sim$	of each appliance
2	Refrigeration or Absorption chiller	//	e. each approxime
3	Instantaneous water, pool or spa heater 1		installed.
4	Tank hot water heater		
0	Hot plate, grill or BBQ		
-	Oven for baking, curing or drying		
1	Decorative fiare or gas lights		
8	Room neater or space neater 1		
8	Other Appliances		
In respect of 1. The gasfit	the gas fitting work I certify that, ting work complies with: AS1596 AS4041 I AS5601		Select the relevant standard for the installation
2. I have test appliances o	ed the installation for defects immediately after completion and inspected all containers and onnected to the installation, where gaswork has been undertaken by me.		
3. By ticking OR	this box I certify that the installation is in safe working order.		Select the tick box to confirm that the
4. The follow	ing are defective: Appliance(s) 🔲 Gas Containers 🗍 Gas Installation 🗍 Gas Regulators		installation is
Please spec	ify		compliant
	//		
	Submit Application		

If defective work is found, select the relevant tick box under question *4. The following are defective*. The options are;

- Appliance(s)
- Gas Containers
- Gas Installation
- Gas Regulators

More than one item may be selected.

When a selection has been made in question 4, the *Please specify* text field will become mandatory. Enter a description of what is defective into this field.

Select the tick box under 5. By ticking this box I certify that I have attached a durable defect notice to the, and then in the related Please specify text field enter where the defect notice was fitted to the installation.

Signature	
In respect of the gas fitting work I certify that,	
1. The gasfitting work complies with: AS1596 AS4041 AS5601	
2. I have tested the installation for defects immediately after completion and inspected all containers and appliances connected to the installation, where gaswork has been undertaken by me.     3. By ticking this box I certify that the installation is in safe working order.     Date:	Select the relevant tick box to indicate what is defective
OR	
4. The following are defective: 🔲 Appliance(s) 🗐 Gas Containers 🦉 Gas Installation 🗐 Gas Regulators	Describes subscribes the defendance
Please specify	Describe what is defective
Describe what is defective here!	
	Select the tick box to confirm that you have fitted a
5. By ticking this box I certify that I have attached a durable defect notice to the 🕑 <0312017	durable defect notice to the
Please specify	
specity where the derect notice has been installed	
Submit Application	Describe what is defective

#### Then select the Submit Application button

The final screen is a confirmation of a successful application and displays a Reference number for the CoC/CoI application. You may also view or print a copy of your application, or if you are finished, you may return to the MyInspections home page to submit another application or log out of MyInspections.





#### 2.1.2 Mobile Installation

Mobile installation may be used for Autogas installations where the gas is used as a fuel in internal combustion engines in vehicles as well as in stationary applications such as generators, or other gas installations such as caravans or marine vessels where the gas is used as a fuel for an appliance.

#### 2.1.2.1. Mobile installation – other than Autogas

The user should fill out the form by starting with the *Installation Type* under the **Job Type** section. Selecting 'Mobile' from the drop down list in this field then selecting 'Caravan' or 'Marine Vessel' in the field labelled *Mobile Installation* will adjust the fields in the form for a mobile installation and only requires input in fields related to mobile gas installations.

Note: A chassis/VIN Number *or* Hull ID Number is required. When the detail is entered into one of these fields and the user selects another field, the remaining field with no detail becomes optional and no longer mandatory.

GAS SUPPLY - L Certificate Type Certificate Type Job Type Installation Type:	Certificate of Inspection	ompliance	Star throu man be fi	t by selecting M ugh the fields of the datory fields. Optic lled out.	lobi e fo nal	le then move rm filling out all fields may also	
Fixed Installation:		Mobile Inst	allation:	Caravan T			
Property / Vehicle Ow Owner's Full Name: Owner's Postal Address:	ner's Details John E Depp 21 Jump St			When Mobile is s Installation' field b mandatory, and 'n field becomes rea	elec becc Fixe	cted, <i>'Mobile</i> omes ed Installation' nly.	
Vehicle Details							
Make:	Jayco	Model:	Expa	ida			
Registration Number:	sbc123	Engine Num	ber:				
Chassis / VIN Number:	RXTA2123E1029349	Hull ID Numb	er:				
Licencee's Details						Licensee Details	are
Olven Names(s)	John	Sumame:	Citize	n		auto populated fr	om
Unit Number:		Street Numb	er	10		the users register	red
Street Name:	Smith	Street Type	Stree			details and are re	ad
Suburb:	PARRAMATTA	State	NSW	Postcode 2150		only on this form	
Contact Number:	0411 555 555						
Qualified Supervisor Number:		Qualified Sup Expiry Date	pervisor				
Licence Number:	112357	Licence Expi	ry Date:	23/11/2019			
Tradesperson's Certificate Number (MVTC):		Certificate Ex	cpiry Date				
Installation Details							



The user should select a Network Operator/ gas supplier by starting to type the suppliers name into the field supplied. As the user types into this field, suggestions appear in the list below. If the supplier doesn't appear in the drop down list, the user may select the *Other Network Operator* tick box and if known, enter an email address into the *Email Address* field.

Installation Details Type of Work: Date Work Commenced	New T	Start to type the name of the supplier/operator, then select the appropriate suggestion from the drop down list.
Gas Leak Check: Network Operator / Gas Supplier: Other Network Operator:		Gas Leak Check Date: 1/09/2017
Email Address:		Next

If the supplier doesn't appear in the drop down list, the user may select the *Other Network Operator* check box and if known, enter an email address into the *Email Address* field.

Installation Details				
Type of Work:	New 🔻			
Date Work Commenced	1/09/2017	Meter Number:		
Gas Leak Check:	Yes     No	Gas Leak Check Date:	1/09/2017	
Network Operator / Gas Supplier:				
Other Network Operator:				
Email Address:	supplier@email.com			
				📀 Next

If the suppliers email is not known, the Email Address field can be left blank, however it is the gasfitters responsibility to forward the suppliers copy of the CoC/CoI to the relevant company.

When you have finished filling out the form, click the next button.

On the next page, the user must indicate what appliances are connected to the gas installation. Insert the number of each type of appliance into the relevant field in the *Quantity Connected* column.

If the works comply, select the relevant standard it complies with under "1. The gasfitting work complies with". More than one standard can be selected.

Select the tick box next to 3. By ticking this box I certify that the installation is in safe working order" to confirm that all work is compliant. The Date will auto populate with the current date.



Appliances	s, Containers and Signature	
Appliances		
Code	Type of Appliances Quantity Connected	
0	Stationary engine power or air conditioner	Enter the number
1	Cooktop or wok cooker	of each appliance
2	Refrigeration or Absorption chiller	or each appliance
3	Instantaneous water, pool or spa heater 1	installed.
4	Tank hot water heater	inotanoai
5	Hot plate, grill or BBQ	
6	Oven for baking, curing or drying	
7	Decorative flare or gas lights	
8	Room heater or space heater 1	
9	Other Appliances	
2. I have tes appliances o	ted the installation for defects immediately after completion and inspected all containers and connected to the installation, where gaswork has been undertaken by me.	installation
<ol><li>By ticking</li></ol>	this box I certify that the installation is in safe working order.	
OR 4. The follow Please spec	wing are defective: Appliance(s) Gas Containers Gas Installation Gas Regulators	Select the tick box to confirm that the installation is compliant
	Submit Application	

If defective work is found, select the relevant tick box under question *4. The following are defective*. The options are;

- Appliance(s)
- Gas Containers
- Gas Installation
- Gas Regulators

More than one item may be selected.

When a selection has been made in question 4, the *Please specify* text field will become mandatory. Enter a description of what is defective into this field.

Select the tick box under 5. By ticking this box I certify that I have attached a durable defect notice to the, and then in the related Please specify text field enter where the defect notice was fitted to the installation.

Signature	
In respect of the gas fitting work I certify that,	
1. The gasfitting work complies with: AS1596 AS4041 AS5601	
2. I have tested the installation for defects immediately after completion and inspected all containers and appliances connected to the installation; where gaswork has been undertaken by me.     3. By ticking this box I certify that the installation is in safe working order.     Date:	Select the relevant tick box to indicate what is defective
OR	
4. The following are defective: Appliance(s) Gas Containers 🗹 Gas Installation Gas Regulators	Describe what is defective
Please specify	
5. By ticking this box I certify that I have attached a durable defect notice to the State: 26/09/2017	Select the tick box to confirm that you have fitted a durable defect notice to the installation.
Please specify	
opeany where the detect house has been installed	
	Describe what is defective
Submit Application	

Then select the Submit Application button

The final screen is a confirmation of a successful application and displays a Reference number for the CoC/CoI application. You may also view or print a copy of your application, or if you are finished, you may return to the MyInspections home page to submit another application or log out of MyInspections.





#### 2.1.2.2. Mobile Installation – Autogas

The user should fill out the form by starting with the *Installation Type* under the **Job Type** section. Selecting 'Mobile' from the drop down list in this field then selecting 'Motor Vehicle' in the field labelled *Mobile Installation* will adjust the fields in the form for a mobile installation and only requires input in fields related to mobile Autogas installations.

Note: A chassis/VIN Number *or* Hull ID Number is required. When the detail is entered into one of these fields and the user selects another field, the remaining field with no detail becomes optional and no longer mandatory.

GAS SUPPLY - Li Certificate Type Certificate Type Job Type Installation Type:	Certificate of Inspection	ompliance	Star thro man be fi	t by selecting I ugh the fields of th datory fields. Opti lled out.	Mob ne fo ona	ile then move orm filling out all I fields may also
Fixed Installation:		Mobile Insta	llation:	Motor Vehicle		
Property / Vehicle Ow Owner's Full Name: Owner's Postal Address:	LPG Autogas			When Mobile is s Installation' field mandatory, and field becomes re	sele bec <i>'Fix</i> ad o	cted, <i>'Mobile</i> comes ed Installation'
Vehicle Details						sj.
Make:	ford	Model:	model <sup>*</sup>	Г		
Registration Number:	sbc123	Engine Numbe	er: JNG12	543654987		
Chassis / VIN Number:	ABC1234567890	Hull ID Numbe	er:			
Licencee's Details						
Siven Names(s)	John	Sumame:	Citizen			Licensee Details are
Unit Number:		Street Number	r	10		auto populated from
Street Name:	Smith	Street Type	Street			the users registered
Suburb:	PARRAMATTA	State	NSW	Postcode 2150		details and are read
Contact Number:	0411 555 555					only on this form
Qualified Supervisor Number:		Qualified Supe Expiry Date	ervisor			
Licence Number:	112357	Licence Expiry	/ Date:	23/11/2019		
Tradesperson's Certificate Number MVTC):		Certificate Exp	oiry Date			
Installation Details						



The user should select a Network Operator/ gas supplier by starting to type the suppliers name into the field supplied. As the user types into this field, suggestions appear in the list below. If the supplier doesn't appear in the drop down list, the user may select the *Other Network Operator* tick box and if known, enter an email address into the *Email Address* field.

Installation Details Type of Work: Date Work Commenced :	New	Start to type the name of the supplier/operator, and then select the appropriate suggestion from the drop down list.
Gas Leak Check: Network Operator / Gas Supplier: Other Network Operator:	Yes  No	Gas Leak Check Date: 1/09/2017
Email Address:		Next

If the supplier doesn't appear in the drop down list, the user may select the *Other Network Operator* check box and if known, enter an email address into the *Email Address* field.

Installation Details			
Type of Work:	New T	]	
Date Work Commenced	1/09/2017	Meter Number:	
Gas Leak Check:	Yes No	Gas Leak Check Date:	1/09/2017
Network Operator / Gas Supplier:			
Other Network Operator:	×		
Email Address:	supplier@email.com		
			📀 Next

If the suppliers email is not known, the Email Address field can be left blank, however it is the gasfitters responsibility to forward the suppliers copy of the CoC/CoI to the relevant company.

When you have finished filling out the form, click the *next* button.

On the next page, the user must enter the details of the AutoGas containers installed in the motor vehicle. Enter the brand, serial number and water capacity of the container. If there is more than one container installed, click on the *Add Autogas Container* button to add fields for another container Insert the number of each type of appliance into the relevant field in the *Quantity Connected* column.

If the works comply, select the relevant standard it complies with under "1. The gasfitting work complies with". More than one standard can be selected.



Appliances, Containers and Signature Autogas Containers Autogas Containers			Select Add Autogas Container to add more containers	
Brand Serial Number elgas 123987456	Water Capacity 85L	*	Enter the details of the	
In respect of the gas fitting work I certify that, 1. The gasfitting work complies with: AS1425 AS1425	31596 🔲 AS2739	AS4041	<ul> <li>Autogas containers installed.</li> </ul>	
<ol> <li>I have tested the installation for defects immediately after comp appliances connected to the installation; where gaswork has been</li> <li>By ticking this box I certify that the installation is in safe working OR</li> </ol>	eletion and inspected all contained undertaken by me. g order.	rs and	Select the relevant standard for the installation	
4. The following are defective: Appliance(s) Gas Con	tainers 🛛 Gas Installation 🗌	Gas Regulators		
Please specify			<ul> <li>Select the tick box to confirm that the installation is compliant</li> </ul>	
		Submit Application		

Select the tick box next to 3. By ticking this box I certify that the installation is in safe working order" to confirm that all work is compliant. The Date will auto populate with the current date.

If defective work is found, select the relevant tick box under question *4. The following are defective*. The options are;

- Appliance(s)
- Gas Containers
- Gas Installation
- Gas Regulators

More than one item may be selected.

When a selection has been made in question 4, the *Please specify* text field will become mandatory. Enter a description of what is defective into this field.

Select the tick box under 5. By ticking this box I certify that I have attached a durable defect notice to the, and then in the related Please specify text field enter where the defect notice was fitted to the installation.



Then select the Submit Application button

The final screen is a confirmation of a successful application and displays a Reference number for the CoC/CoI application. You may also view or print a copy of your application, or if you are finished, you may return to the MyInspections home page to submit another application or log out of MyInspections.





# **3 MyInspections Search Function**

A user is able to search MyInspections for past applications and submissions they have made.

To use the search function, click on the *MyApplications* button located under the *User Details* tab

NSW Fair Trading Home	Applications	Documentation	User Details	Logout
			MyDetails	
			Change Password	
			MyApplications	

When the search window opens, enter the search criteria into the relevant field, then click on Search. A wild card may be used where all details for search field are not known. A wildcard is the % symbol and may be used in place of a word or part of a word, eg. %mont will search the relevant field for any word ending in "mont".

MyInspection Searc	h		
Search Criteria			
Inspection Type:	T		
MyInspection Application Number:			
Licensee/Property Details			
Licensee First Name:		Licensee Surname:	
Property Master Strata Plan Number:		Property Deposited Plan Number/ Proposed Deposited Plan Number:	
Property Lot Number:			
Property Unit Number:		Property Street Number:	
Property Street Name:	jump	Property Street Type:	
Property Suburb:			
Licence / Certificate Number :		Licence / Certificate Expiry Date:	
Email Address (username):			
Application Lodged From:		Application Lodged To:	
Sasrah Basulfa			PSearch Clear
Search Results:			



The search can be filtered further by selecting 'Gas Supply' under the field named *Inspection Type.* This will display extra fields that can narrow the search parameters. The extra filters are as follows;

- Certificate Type filter by certificate of Compliances or Certificate of Inspections
- Installation Type filter by the installaion type of Fixed or Mobile
- Fixed Installation filter by Commercial, Domestic or Industrial installation
- Mobile Installation Filter by Caravan, Marine Vessel or Motor Vehicle
- Type of Gas filter by the type of gas;
  - CNG Autogas
  - LPG Autogas
  - LPG (butane)
  - o LPG (Propane)
  - o Natural Gas
  - o Other
- Supplier / Operator User can limit the search to a supplier or operator by typing it into this field

h	
Gas Supply	Certificate Type:
T	Fixed Installation:
T	Type of Gas:
	·
	Licensee Sumame:
	Property Deposited Plan Number/ Proposed Deposited Plan Number.
	Gas Supply is
	Property Street Number:
	Property Street Type:
	Licence / Certificate Expiry Date:
	Application Lodged To:
	Pseerch Clear
	h



When the search is complete, the results will be displayed. The user can click on the file in the Certificate column to view the Certificate of Compliance or Certificate of Inspection associated to the application.

Search Results:	:					
						Export Result
MyInspections No.	Lodgement Date	Inspection Details	Licencee Name	Property Details	Attachments	Certificates
GAS201700057	27/09/2017		John Citizen			1
GAS201700056	27/09/2017		John Citizen	21 Jump St PARRAMATTA NSW 2150		🛪
GAS201700055	27/09/2017		John Citizen	21 Jump Street PARRAMATTA NSW 2150		1
GAS201700054	27/09/2017		John Citizen	21 Jump PARRAMATTA NSW 2150		➡
Previous 1 Next						

Note: the information box displays a legend of the preffix associated to the MyInspection Number which is shown below:

