



Annexure 1

DEPARTMENT OF LABOUR OCCUPATIONAL
HEALTH AND SAFETY ACT, 1993
CERTIFICATE OF COMPLIANCE

Certificate of compliance in accordance with regulation 7 (1) of the Electrical Regulations 2009 Installation	CERTIFICATE NO: <div style="border: 1px solid black; padding: 2px; display: inline-block;">B 187240</div>	Certificate type (tick appropriate block) <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 50%; text-align: center;">Initial Certificate <div style="border: 1px solid black; padding: 2px; display: inline-block; color: red; font-weight: bold;">Yes</div></td><td style="width: 50%; text-align: center;">Supplementary Certificate <div style="border: 1px solid black; padding: 2px; display: inline-block; color: red; font-weight: bold;">No</div></td></tr></table>	Initial Certificate <div style="border: 1px solid black; padding: 2px; display: inline-block; color: red; font-weight: bold;">Yes</div>	Supplementary Certificate <div style="border: 1px solid black; padding: 2px; display: inline-block; color: red; font-weight: bold;">No</div>
Initial Certificate <div style="border: 1px solid black; padding: 2px; display: inline-block; color: red; font-weight: bold;">Yes</div>	Supplementary Certificate <div style="border: 1px solid black; padding: 2px; display: inline-block; color: red; font-weight: bold;">No</div>			
Supplement No. _____ to initial certificate NO. _____ as issued on: _____				
Identification of the relevant electrical installation (Address or other unique reference, where applicable) Physical address: <u>78 GAIGHER</u> Name of building: <u>NISSAN ROSSLYN</u> GPS co-ordinates: <u>S 25 37 20 E 28 05 17</u> Suburb/Township: <u>ROSSLYN EXT 1</u> Pole number: _____ District/Town/City: <u>PRETORIA, Gauteng</u> Erf/Lot No: _____				
Declaration by registered person I, <u>Daniel Jacobus Botha</u> (ID No. <u>660606 5004 085</u>) a registered person declare that I have personally carried out the inspection and testing of the electrical installation described in the attached test report as per the requirements of: (Tick appropriate box) a) electrical installation regulations 9(2) (a) (new electrical installation); or <input type="checkbox"/> b) electrical installation regulations 9(2) (b) (existing electrical installation); or <input type="checkbox"/> c) electrical installation regulations 9(2) (c) (new part to existing installation) <input checked="" type="checkbox"/> and deem the installation to be reasonably safe when properly used.				
I have entered the number of this certificate on the attached test report (s) I declare that the persons responsible for the design, specification, procurement, construction commissioning and inspection and test have completed the relevant sections of the test report, Registered person registration number: <u>17079</u> Date of registration: <u>13/6/2003</u> Type of registration: (Tick appropriate block) Tester for Single phase <input type="checkbox"/> Installation Electrician <input checked="" type="checkbox"/> Master Installation Electrician <input type="checkbox"/> <div style="text-align: center; margin-top: 20px;"> Signature: _____ Date: _____</div> Contact Details of registered person: Address: <u>282 Maggs Street, Waltloo, Pretoria, 0128</u> Tel No: <u>012 803 5850</u> Fax No: <u>012 803 9912</u> Cell No: <u>082 821 5950</u> Email: <u>admin@cellroy.co.za</u>				
NOTE: 1. This certificate is not valid unless all the sections have been completed correctly and the test report in the format approved by the Chief Inspector is attached. 2. This certificate will be invalid if any corrections have been made.				
Declaration by electrical contractor I, <u>Owner</u> (ID no. <u>600528 5059 088</u>) declare that the electrical installation has been carried out in accordance with the requirements of the Occupational Health and safety Act, 1993, and regulations made thereunder. Electrical contractor registration number: <u>GN00348</u> Date of registration <u>17/1/2020</u> <div style="text-align: center; margin-top: 20px;"> Signature: _____</div> Contact details of electrical contractor Address: <u>282 Maggs Street, Waltloo, Pretoria, 0128</u> Tel No: <u>012 803 5850</u> Fax No: <u>012 803 9912</u> Cell: <u>082 821 5950</u> Email: <u>admin@cellroy.co.za</u>				
Recipient name: _____ Signature: _____ Date: _____				



THE ELECTRICAL CONTRACTING BOARD OF SOUTH AFRICA

590 Kobus Street Silverton, Pretoria 0184 Gauteng. PO Box, 912479 Silverton, 0127.
TEL.(012) 7512290 / 7514025 - FAX 086 5419596 e Mail info@ecbsa.co.za

Test report for all electrical installations. To SANS 10142-1Amdt 8.

INITIAL CERTIFICATE OF COMPLIANCE NO: Supplementary NO:
Date of issue: CLIENTS Job No:

- ECB NOTES:-**
1. ELECTRONIC CoC / TEST REPORT AVAILABLE ON www.ecbsa.co.za.
 2. Electronic CoC number will print automatically on each page of the test report
 3. Contractor to attach the initial CoC number to distribution board. All subsequent CoC's will be supplementary.
 4. Items in red are for guidance only and are not compulsory

NOTE 1 In terms of South African legislation, the user or lessor is responsible for the safety of the electrical installation

NOTE 2. This report covers only the part of the installation described in section 3.

NOTE 3. This report covers the circuits for fixed appliances, but does not cover the actual appliances, for example stoves, geysers, air conditioning and refrigeration plant and lights.

NOTE 4. Medical and hazardous locations require additional test reports (see 8.8.2 and 8.8.3).

NOTE 5. Enter the required information or tick the appropriate block.

SECTION 1 – LOCATION

Physical address: **78 GAIGHER**

Name of building **NISSAN ROSSLYN**

In the case of multiple units e.g. shopping malls, cluster housing, enter relevant unit number:

SECTION 2 – INSTALLATION

Existing installation: ☐ Alteration/extension: ☒ New installation: ☐ Temporary installation: ☐

Type of installation: Residential: ☐ Commercial: ☒ Industrial: ☐ Common areas for multiple users: ☐

Other: ☐ Describe:

Initial certificate number: Date issued : Not available: ☐

Additional information if required:

Type of electricity supply system:

TN-S ☒ TN-C-S ☐ TN-C ☐ TT ☐ IT ☐ Supply earth terminal provided: Yes: ☒ No: ☐

Characteristics of supply: Voltage: 230 V ☐ 400 V ☒ 525 V ☐ Other, record voltage:

Number of phases: One: ☐ Two: ☐ Three: ☒ **Phase rotation:** Clockwise: ☒ Anticlockwise: ☐ NA: ☐

Frequency: 50Hz: ☐ Other: DC: ☐ **Prospective short-circuit current** at point of control: (PSCC) kA

How determined? Calculated ☐ Note, above 100A to be calculated: Measured ☐

From supplier: ☐

Main supply feeder: Cable: ☒ Number of cores: Bus bars: ☐ Cross sectional area sq mm: Length Met:

Main switch type: (For sub distribution board details refer to section 3)

Switch disconnector (on-load isolator) ☐ Fuse switch: ☐ Circuit-breaker: ☒

Earth leakage circuit-breaker: ☐ Earth leakage switch disconnector: ☐

Number of poles: Current rating: A Short-circuit/withstand rating: kA .

Rated earth leakage tripping current $I_{\Delta n}$: 30 mA: ☐ Other: mA.

Surge protection (see 6.7.6 and annex L): Yes: ☐ No: ☒

Is alternative power supply installed? (See 7.12.) Yes: ☐ No: ☒

Is any part of the installation a specialized electrical installation?: Yes: ☐ No: ☒ If yes, complete additional test reports (see 8.8.2 or 8.8.3).

Is any part above 1kV. Yes: ☐ No: ☒ If yes, competent person to approve design and complete additional test reports (see 8.6.3 and SANS 10142-2)

Is this installation of 5 units or more on the same new supply? Yes: ☐ No: ☒ If yes, name of competent person who supervised the installation must be provided (see 8.2.3) Refer to section 5.5.

SECTION 3 - DESCRIPTION OF INSTALLATION COVERED BY THIS REPORT

NOTE:- This is a TEST REPORT and it is advisable to be as specific as possible in the description of the installation.
E.G. Existing, give short description and condition of installation and type of materials used. New or extended installations, add drawings, specifications and material approval. Add extra pages and list them as annexures to be read in conjunction with this test report if necessary.

INSTALL 79M 16X4CORE ARMoured CABLE WITH 10mm EARTH CONNECT TO 63A TP CB AND VODACOM CONTAINER TEST INSTALLATION

Number of CIRCUITS and or POINTS covered by this report.

NOTE:- 1. Reproduce this page as an annexure for each additional switchboard where necessary. 2. Unshaded items in column 1 are compulsory items and must be completed, shaded are optional.	Please choose....			Please choose....			Please choose....			Please choose....		
	Main distribution board.			Sub-distribution board #1.			Sub-distribution board #2.			Sub-distribution board #3.		
	Points/ circuits	CB Rating	Cond- uctor	Points/ circuit	CB Rating	Cond- uctor	Points/ circuits	CB Rating	Cond- uctor	Points/ circuit	CB Rating	Cond- uctor
ALL TYPES OF CIRCUITS	No of	A	sq mm	No of	A	sq mm	No of	A	sq mm	No of	A	sq mm
Insert Distribution Board Designation ie Number.												
Sub main switch/conductor details. Isolator	kA.			kA.			kA.			kA.		
Earth leakage / sockets only												
Lighting circuits:- Enter number for each board.												
Lighting points:-Enter number for each board.												
Socket outlet circuits:-Number for each board.												
Socket outlets:- Enter number for each board.												
Socket outlet circuits for critical applications.												
Socket outlets for critical applications.												
Three phase socket outlet circuits.												
Three phase socket outlets.												
Mixed circuits:- Number of.												
Type of mixed circuits:- Lights/plugs.												
Other types of mixed circuits:-State Type below												
Other circuits. Add details where necessary.												
Air conditioning circuits												
Refrigeration circuits. (industrial)												
Low voltage lighting circuits, as follows.												
Transformer / low voltage circuits	Lighting points											
	Lighting circuits											
	Trf < 50w											
	Trf > 50w											
	Protection fitted,											
Heating circuits.	Bell											
	Other											
	Floor											
Number of heating cts	Space											
	Other											
	Extract											
Ventilation and other Fan circuits.	Industrial											
	Fan / light											
	Hob extract											
	Ventilation.											

Section 3 continued
Continuation of circuits and points covered by this report.

NOTE:-

1. Reproduce this page as an annexure for each additional switchboard where necessary.
2. Unshaded items in column 1 are compulsory items and must be completed, shaded are optional.

Please choose....

Please choose....




Please choose....

Please choose....

TYPE OF CIRCUITS		Point designation	Main distribution board.			Sub-distribution board #1.			Sub-distribution board #2.			Sub-distribution board #3.		
			Points / circuits	CB Rating	Conductor	Points/ circuit	CB Rating	Conductor	Points / circuit	CB Rating	Conductor	Points circuits	CB Rating	Conductor
			No of	A	sq mm	No of	A	sq mm	No of	A	sq mm	No of	A	sq mm
Motor circuits.														
Control circuits														
Motor control assemblies														
Escalator circuits.														
Escalator points.														
Elevator (Lift) circuits.														
Elevator (Lift) points.														
Hoist circuits.														
Hoist points.														
Other lifting device circuits, specify														
Other lifting device points.														
Signage circuits requiring fire sw.														
Signage points.														
Fixed appliance circuits	Stove combo													
	Hob													
	Oven.													
	Cooking pot													
	Bain-marie													
	Cold room													
	Borehole pump													
	Pumps													
	Pool													
	Other													
Overhead Tap off busbars														
Type of tap off protection														
Alternative power connections	Generator													
	UPS													
	Photo voltaic													
	Other													
Water heaters	Solar/electric													
	Solar only													
	Geyser													
Other Circuits	SUPPLY		1	63	16									

Add additional comments in respect of section 3 if required.

SECTION 4 TEST REPORT CONTINUED							
INSPECTION							
COMMENTS							
Tick "Yes" or "N/A" in relevant block. NOTE:- The report may not be issued if any "No" answer appears.		Existing installation.		New, temporary or altered installation.			
Insert comments if necessary in space provided below each question.		Yes	N/A	Yes	N/A	No	
1 Accessible components are correctly selected		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2 All protective devices are of correct rating		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3 All protective devices are capable of withstanding the prospective fault level		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4 Conductors are of the correct rating and current-carrying capacity for the protective devices and connected load		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5 Components have been correctly installed		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6 Disconnecting devices are correctly located and all switchgear switches the phase conductors		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7 Different circuits are separated electrically		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8 Connection of conductors and earthing and bonding are mechanically sound.		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9 Connection of conductors and earthing and bonding are electrically continuous.		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10 Circuits, fuses, switches, terminals, earth leakage units, circuit-breakers, distribution boards are correctly and permanently marked or labelled.		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11 Where an electrical circuit passes through a fire barrier, the integrity of the fire barrier has been maintained.		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12 Safety and emergency lighting and signs are functioning correctly		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
13(a) In the case of new installations , or additions or alterations to existing installations , the new, installation complies with this part of SANS 10142 - 1 or		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13(b) In the case of installations that existed before the publication of this edition of SANS 10142-1, the installation complies with the general safety requirements in this edition of this part of SANS 10142-1 (ie Section 5) and is reasonably safe.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
NOTE In respect of 13 above, tick (a) or (b) or (a) and (b) on the test report where applicable.							
14 Where an alternative supply is installed, it complies with the requirements in respect of connections, change-over switch and indicator requirements.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
15 Is the position of the readily accessible earthing terminal for earth connections of other services by installers of such services (see 6.11.5) indicated on the distribution board (see 6.6.1.21.(e))?		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

TESTS		Readings obtained			
<p>NOTE:- Installation tests must be carried out using the correct calibrated instrument.</p> <p>Carry out all the tests for the main distribution board. Also conduct all tests and complete copies of the tests for each sub-distribution and for each supply (i.e. normal and alternative supplies).</p> <p>Add as many of these sheets as are necessary for sub-distribution boards.</p> <p>Attach these reports as annexures to this report.</p>		Type of instrument employed for test	Existing Installation Record Units	New/ temporary/ or altered installation	
1. Continuity of all bonding conductors			Ω	0.1	Ω
2. Resistance of each earth conductor must be recorded, as listed below.		<<<>>	<<<>>	<<<>>	
2.1. Measure and record from suppliers earth point to main earth bar.			Ω	0.1	Ω
2.2. From Main E bar to sub-distribution boards.			Ω		Ω
2.3. From earth bar to all socket outlets.			Ω		Ω
2.4. From earth bar to all metallic lighting points and switches if necessary			Ω		Ω
2.5. From earth bar to appliances			Ω		Ω
2.6. Other.			Ω		Ω
3. Continuity of ring circuits and labeling as required.(if applicable)					
4. Loop impedance test at following points between line/earth-Line/neutral.		<<<>>	<<<>>	<<<>>	
4.1. Point of control supply side main sw - L/E. Record 26 Ω L/N. Record			Ω	29	Ω
4.2. Sub-distribution boards supply side - L/E Record 27 Ω L/N.Record			Ω	30	Ω
5. Prospective short-circuit current for sub-distribution boards, at point of control.		<<<>>	<<<>>	<<<>>	
5.1. Point of control. Tick block. Measured <input checked="" type="checkbox"/> or, Calculated. <input type="checkbox"/> Record			kA	1.1	kA
5.2. Sub-distribution boards.Tick block. Measured, <input checked="" type="checkbox"/> or Calculated, <input type="checkbox"/> Record			kA	1.1	kA
6. Elevated voltage between incoming neutral and ground (E)			V		V
7. Earth (ground) resistance of electrode (if required). (TT Systems)			Ω		Ω
8. Insulation resistance on		<<<>>	<<<>>	<<<>>	
8.1. All new additions, including all existing domestic installations.			MΩ	INF	MΩ
8.2. All other installations where possible			MΩ		MΩ
9. Record the following voltages (where applicable) as described below.		<<<>>	<<<>>	<<<>>	
9.1. Average no load volts at the point of control between phases (P1,2,3)..			V	399	V
9.2. Average no load volts between phases and neutral.			V	231	V
9.3. Average no load volts between phases and earth.			V	231	V
10. Record on load volts below. (Load must be stated at time of test).		<<<>>	<<<>>	<<<>>	
10.1. Average on load volts between phases.			V	399	V
10.2. Average on load volts between phases and neutral.			V	228	V
10.3. Average volts between phases and earth.			V	224	V
10.4. Record load used for at the above test at time of test.			A	16	A
11 Calculate using the above information the maximum volt drop at full load.			V	4	V
12. Earth leakage tests. EL unit's test button operates correctly. (Tick block)		<<<>>	Correct	<input type="checkbox"/>	Correct <input type="checkbox"/>
12.1.Earth leakage tripping current is? Record tripping current.			mA		mA
13. Polarity of all points of consumption and switching devices.			Correct	<input type="checkbox"/>	Correct <input checked="" type="checkbox"/>
14. Phase rotation at points of consumption for three-phase systems (Tick block)					
15. All switching devices make-and-break circuits. (Tick block)			Correct	<input type="checkbox"/>	Correct <input checked="" type="checkbox"/>
<p>COMMENTS on the installation. If there are any items on the installed installation that need highlighting, they shouldbe stated here. These should include informing the user of their obligation, particularly in respect of regulation numbers 2(1), 7 (1), (2), (3), (4), (5).</p> <p>SUPPLY CABLE ONLY</p> <p>COMMENTS on any part of the installation not covered by this test report. If any other contractor, or specialist was or is involved in electrical installation work as defined, this work should be excluded from this COC and a separate COC for their part issued by them, unless otherwise agreed.</p> <p>EXCISTING INSTALLATION</p> 					

Test report (continued)
SECTION 5 – RESPONSIBILITY

NOTE:- For existing installations, complete only 5.4. For new/altere/temporary installations, if no signature appears in 5.1 to 5.3, the signatory of 5.4 takes responsibility. Where there are five or more installations on the same supply, a competent person signs 5.5.

5.1 DESIGN. I, being the person responsible for the DESIGN of the electrical installation, particulars of which are described in section 3 of this form, CERTIFY that the work for which I have been responsible, is to the best of my knowledge and belief in accordance with the relevant legislation. The extent of my liability is limited to the installation described in section 3 of this form.

For the DESIGN of the installation

Name (in block letters): Position:

Address: Profession Registration No.(where applicable)

Signature : Date:

5.2 MATERIAL SPECIFICATION/PROCUREMENT. I/We, being the person(s) responsible for the MATERIAL SPECIFICATION/PROCUREMENT of the electrical installation, particulars of which are described in section 3 of this form, CERTIFY that the equipment that I/we have procured, is to the best of my/our knowledge and belief in accordance with the relevant legislation. The extent of liability of the signatory is limited to the installation described in section 3 of this form.
For the MATERIAL SPECIFICATION/PROCUREMENT

For the MATERIAL SPECIFICATION/PROCUREMENT of the installation

Name (in block letters): For and on behalf of:.....

Position: Address:

Signature: Date:

5.3 CONSTRUCTION. I/We, being the person(s) responsible for the CONSTRUCTION of the electrical installation, particulars of which are described in section 3 of this form, CERTIFY that the work for which I/we have been responsible, is to the best of my/our knowledge and belief in accordance with the relevant legislation. The extent of liability is limited to the installation described in section 3 of this form.
For the CONSTRUCTION of the installation:

For the CONSTRUCTION of the installation

Name (in block letters): For and on behalf of contractor:.....

Signature: Date:

5.4 INSPECTION AND TESTS. I, being the person responsible for the INSPECTION AND TESTING of the electrical installation, particulars of which are described in section 3 of this form, CERTIFY that the inspection and testing were done in accordance with this part of SANS 10142, that the results obtained and reflected on this report are correct, and indicate by ticking the appropriate block that
☒ (for installation work performed since the publication of this part of SANS 10142), compliance with this standard, or
☐ (for an installation that existed before the publication of this part of SANS 10142), that the installation complies with the general safety principles of this standard and is reasonably safe.

The extent of my liability is limited to the installation described in section 3 of this form.

Name of registered person: (block letters) **Daniel Jacobus Botha** Registration certificate No.: **17079**

Type of registration:: Master installation electrician, ☐ Installation electrician, ☒ Tester for single-phase. ☐

Signature: Tel.No.: **082 821 5950**

Registration certificate valid until:- Date **30/9/2020** Date: **20-May-2020**