

CERTIFICATE OF FITNESS

For Electrical Installation

Certificate No.: _____

Date of Issue: _____

Owner/Applicant Name: _____

Address of Installation: _____

Type of Installation: _____

Installation Voltage: _____

Total Load (kW): _____

Date of Inspection: _____

Tested By (Name & Reg. No.): _____

Remarks: _____

This is to certify that the electrical installation described above has been tested and inspected in accordance with the relevant standards and is considered fit for use.

Signature of Certifying Officer: _____

Name: _____

Designation: _____