



Certification of Compliance / Guaranteed Work
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	INSPECTION REQUEST FORM
DATE:	
CONTACT PERSON FOR ACC	SS:
TEL NO:	CELL NO:
EMAIL:	
GAS BEETLE	ELECTRICAL PLUMBING ELECTRICAL FENCING
	* PLEASE SELECT THE APPROPRIATE BOXES
ADDRESS:	
ERF NO:	
TRANSFERRING ATTORNEY:	
POSTAL ADDRESS:	
TEL NO:	FAX/EMAIL:
SELLER NAME:	TEL NO:
PURCHASER NAME:	TEL NO:
EVECTED DATE OF TRANSF	TD.

OUR QUALIFIED STAFF ARE REGISTERED WITH:

Department of Labour
Electrical Contractors Association
Electrical Contracting Board of South Africa
LP Gas Safety Association of South Africa
Plumbing Industry Registration Board

One dedicated inspection team can do up to 5 inspections during 1 appointment