

**Test and Examination Report of LPG Fuel Tanks for LPG Vehicles  
under Regulation 8 of The Gas Safety (Gas Supply) Regulations, Cap. 51B**

**To: The Gas Authority**

GasSO Reference: GSO/GSD-B/032/06/04

The LPG Fuel Tank Workshop should submit the **original copy** of this duly completed form to the Gas Authority within **7 working days** after completion of test and examination of the LPG Fuel Tank.

<input type="checkbox"/> <b>Test and Examination of LPG Fuel Tank</b>	<input type="checkbox"/> <b>Replacement of LPG Fuel Pump or internal or external components of LPG Fuel Tank</b>	<input type="checkbox"/> <b>Replacement of tampered security labels</b>
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Note: Please tick the appropriate box(es)

Name of Vehicle Maintenance Workshop for detachment of the LPG Fuel Tank	LPG Fuel Tank S/N.	Last Test Date	Vehicle Registration Mark	Chassis Number/ V.I. Number

LPG Fuel Pump Base Serial Number		LPG Fuel Pump Cores Serial Number		Supply Company for Replaced LPG Fuel Pump	Company for Handling Scrapped LPG Fuel Pump
(Scrapped Pump)	(Replaced Pump)	(Scrapped Pump)	(Replaced Pump)		

<b>Detail of the scrapped security labels:</b>	<input type="checkbox"/> <b>Security Label 1</b> S/N: _____	*Red / Blue
	<input type="checkbox"/> <b>Security Label 2</b> S/N: _____	*Red / Blue
	<input type="checkbox"/> <b>Security Label 3</b> S/N: _____	*Red / Blue
	<input type="checkbox"/> <b>Security Label 4</b> S/N: _____	Red
	<input type="checkbox"/> <b>Security Label 5</b> S/N: _____	Red
	<b>If the security labels are found to be tampered, whether an Improvement Notice (I.N.) is attached to the fuel tank:</b>	
<input type="checkbox"/> <b>Attached with I.N.</b> I.N. No. : _____		<input type="checkbox"/> <b>Not attached with I.N.</b>

Note: (i) "✓" means the labels are intact; "x" means the labels are tampered; "NA" means not applicable

(ii) Please refer to Section 3.1.3 of the Code of Practice on Security Label System for LPG Vehicle Fuel Tanks concerning the locations of the security labels.

<b>Detail of the replaced security labels:</b>	<b>Security Label 1</b> S/N: _____	Red
	<b>Security Label 2</b> S/N: _____	Red
	<b>Security Label 3</b> S/N: _____	Red
	<b>Security Label 4</b> S/N: _____	Red
	<b>Security Label 5</b> S/N: _____	Red
	<b>Name of the person affixing the labels</b> _____	
<b>Date of affixing the labels</b> _____		

<b>External Examination:</b>	Pass/Fail*	<b>Examination of Associated Fittings (including Excess Flow Valve, Fill Limiter and Level Gauge)</b>	In proper condition / Not in proper condition*
<b>Internal Examination:</b>	Pass/Fail*		
<b>Pressure Relief Valve S/N: (_____)</b>	Activated at: _____ (kPa) Pass/Fail*	<b>Pneumatic Leak Test</b>	Test Pressure: _____ (kPa) Pass/Fail*
<b>Hydrostatic Test</b>	Test Pressure: _____ (kPa) Pass/Fail*		<b>New Info. Plate Securely Fixed</b>
<b>Future Usage</b>	Vehicle Installation / Spare / Others * - Please specify:		
<b>Remarks (E.g. Components replaced)</b>			

\* Delete as appropriate

I certify that the above LPG fuel tank has been satisfactorily tested and examined under my supervision in accordance with the Gas Standards Office's requirements in order to comply with Regulation 8 of the Gas Safety (Gas Supply) Regulations, Cap. 51B, and that the LPG fuel tank is safe to contain LPG.

Company Chop: _____	Location of Testing: _____	Test / Exam By: _____
Company Name: _____		Certified by Competent Person (Class 1): _____
Test Date: _____	Signature : _____	

**LPG VEHICLE FUEL TANKS DETACHMENT/REPLACEMENT FORM**

**To : The Gas Authority**

- For scrapped LPG vehicle, please complete **ONLY Part I**.
- For LPG fuel tanks replacement, please complete **BOTH Part I and Part II**.
- The completed form should be submitted to the Gas Authority **within 3 weeks** after the assembly of LPG fuel tank for record.

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**PART I**

**Vehicle Information:**

Vehicle Registration Mark	
Chassis Number/V.I. Number	
Make and Model	

**Detached LPG Fuel Tank:**

LPG Tank Serial Number	
Last Test Date	
Whereabouts	
Disassemble Date	

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**PART II**

**Assembled LPG Fuel Tank:**

LPG Tank Serial Number	
Last Test Date	
Assemble Date	

**Replacement of LPG Fuel Inlet Hose (has to be replaced every 5 years):**

LPG Fuel Inlet Hose Batch Number	
Replacement Date (if appropriate)	

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I certify that the LPG fuel tank of the above LPG vehicle has been detached / replaced\* as detailed above.

Company Chop: \_\_\_\_\_ Certified by Competent Person (Class 6): \_\_\_\_\_

Vehicle Maintenance Workshop: \_\_\_\_\_ Competent Person (Class 6) Certificate No.: CP6 - \_\_\_\_\_

Vehicle Maintenance Workshop Signage No.: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*delete as appropriate

The Gas Authority:      Address:    EMSD, 3 Kai Shing Street, Kowloon, Hong Kong      Fax : 2576 5945