



Gas Wall Heater – AIRA Heater

OBJECTIVE:

August 2008

To ensure that risk to life or property from a gas leak, is minimized by engaging a competent person (e.g. qualified plumber & gas fitter) to undertake an **urgent inspection of any AIRA Heater (Gas fuelled – by either LPG Cylinders or Natural Gas – Mains Supply – Domestic or Commercial)**.

BACKGROUND:

An incident which resulted in a substantial gas leak into a building being occupied by a large volume of persons with an ignitions source 'naked flame', resulting in a near miss occurred. This required an immediate removal of ignition source 'naked flame' (lit candles) and the evacuation of persons, until the gas supply was terminated and the building cleared of vapours built up.

ACTION(S) REQUIRED:

- ✓ Identify any AIRA Heaters present on any site within your control
- ✓ Verify that any/all AIRA Heaters have been serviced by a qualified Plumber & Gas Fitter in the last 3-6 months
- ✓ In the occurrence that the AIRA Heater(s) have not been serviced in the last 6 months;
 - o Engage a qualified (Plumber & Gas Fitter)
- ✓ The plumber & gas fitter MUST:
 - o Verify and document the state of the gas heater appliance
 - Provide specific details as to the operable state of the:
 - Flame Fail Valve
 - Electrode
 - Strike Bracket for flame fail valve
- Maintain a copy of all information pertaining to the above, and ensure that a 'maintenance schedule' is developed and/or maintained for ongoing servicing of the above units every 3-6 months, in addition to any other required maintenance on any other plant/equipment.

To assist you/your site with this process please see the attached checklist.

IMPORTANT REMINDER NOTE:

It is a requirement of the Exempt Licence that you notify your OHS Consultant or the Office with any notifiable occurrence or notifiable injury. From this report our office will be able to progress the *legal* requirement to notify Safework SA where a Dangerous Occurrence happens or where there is a Notifiable injury. The Office of the Technical Regulator may also need to be advised also, please refer to your consultant for further information.



Hazard Checklist



AIRA HEATER (Completed form to be maintained at the site)

August 2008

		DATE & NAME OF PERSON
DESCRIPTION OF REQUIREMENTS	YES/COMPLETED	COMPLETING TASK
Does your site use or possess any ARIA Heater(s) appliance/units within any of		
the sites/buildings within your control?		
<i>If you answer YES</i> to this question, continue with checklist as a priority and fax		
completed checklist form to 8210 9340 by close of business Friday 15 th August		
2008.		
If you answer NO to this question, state on checklist 'not applicable' date and sign		
and file the document for record keeping purposes.		
Inspect all documentation to verify when the unit/appliance was last serviced by a qualified plumber & gas fitter?		
If the service was within a three (3) to six (6) month period then file all service		
records with this hazard alert		
If the last service recorded was outside of a six (6) month period then immediately		
(within the next 24-48 hours) engage the services of a qualified plumber & gas		
fitter to service the units/appliances and ask them to specifically provide a written		
report on the operable condition of the following components:		
 Flame Fail Valve 		
 Electrode 		
Strike Bracket for flame fail valve		
Maintenance schedule has been developed or verified for this appliance/unit(s)		
Site responsible person to ensure a copy of all documentation is maintained for		
record keeping purposes		
Site responsible person to ensure a copy of all documentation is available for		
inspection by either CSH&W and/or CESA OHS Consultants or SafeWork SA		
Inspectors		
Please provide information regarding the type of gas supply used:		
LPG Gas Cylinder		
Natural Gas – Mains - Denote whether Domestic or Commercial		
If you require any further assistance or specific information in relation to this		
Hazard Alert, please contact your OHS Consultant for your site or contact the		
CSH&W Office on 8210 9342 for further assistance.		
Signed:	Date:	