**CERTIFICATE OF COMPLIANCE OF WATER INSTALLATION ON TRANSFER OF OWNERSHIP IN ACCORDANCE WITH THE WATER BY-LAW**

**Transfer of ownership**

**14**.(1) The seller must, before transfer of a property, submit a certificate from an accredited plumber certifying that –

1. the water installation conforms to the national Building Regulations and this By-law;
2. there are no defects;
3. the water meter registers; and
4. there is no discharge of stormwater into the sewer system.

**Plumber’s Checklist**

🞏The Hot Water Cylinder is plumbed correctly, PRV of the correct value, vacuum breakers correctly installed, emergency overflow installed with a metallic pipe, all three overflows to be separately plumbed to the outside and discharge to atmosphere.

🞏The water meter registers when a tap is open and stops completely when no water is drawn. If there is then movement on the meter, this points to a defect somewhere on the property.

🞏None of the terminal water fittings leak and they are correctly fixed in position.

🞏No stormwater is discharged into the sewerage system.

🞏There is no cross connection between the potable supply and any grey water or groundwater system which may be installed.

🞏The water pipes in the plumbing installation are properly saddled.

****

**SCHEDULE 4**

**CERTIFICATE OF COMPLIANCE OF WATER INSTALLATION ON TRANSFER OF OWNERSHIP IN ACCORDANCE WITH THE WATER BY-LAW**

**PROPERTY ADDRESS …………………………………**

**………………………………………………………………………………………………………………………………**

**ERF NUMBER ……………………………………………**

**NAME OF SELLER ……………………………………...**

**CONTACT DETAILS OF SELLER …………………….**

**………………………………………………………………**

**NAME OF BUYER ……………………………………….**

I, …………………………………………….…, a suitably accredited plumber, certify that I inspected the plumbing installation at the above address, and confirm that:

🞏The water meter is registering,

🞏There are no defects which can cause water to run to waste, and

🞏There is no ingress of rainwater into the sewerage system.

**SIGNATURE: …............................. DATE: …………..**

**PRINT NAME & CONTACT DETAILS: ……….………… …………………………………………………………………**

**REGISTRATION NUMBER: ……………………………….**

Conveyancing attorney to submit completed form to: Email:  [coc@capetown.gov.za](mailto:%20coc@capetown.gov.za)