

# DOMESTIC ELECTRICAL INSTALLATION CONDITION REPORT

Requirements For Electrical Installations - BS 7671 IET Wiring Regulations

Report Reference: 0013012



## DETAILS OF THE PERSON ORDERING THE REPORT

Client: Stephen Beveridge

Address:

## REASON FOR PRODUCING THIS REPORT

Reason for producing this report:

Landlords safety report

Date(s) on which inspection and testing was carried out: 26/02/2021

## DETAILS OF THE INSTALLATION WHICH IS THE SUBJECT OF THIS REPORT

Installation Address: 181 AVOCETT WAY, BICESTER

Estimated age of wiring system: 20 years

Evidence of additions/  
alterations:

Yes if yes, estimated age: 20 years

Installation records available? (Regulation 651.1)

No

Date of last inspection: N/A

## EXTENT AND LIMITATIONS OF INSPECTION AND TESTING

Extent of the electrical installation covered by this report:

50% of the installation in accordance with item 3.8.2 of Guidance Note 3.

Agreed limitations including the reasons (see Regulation 653.2):

Characteristics of primary supply overcurrent device. No testing of HVAC control cables. No testing of unverified circuits. ACCESSORIES UNABLE TO ACCESS NOT TESTED

Agreed with: N/A

Operational limitations including the reasons:

N/A

The inspection and testing detailed in this report and accompanying schedules have been carried out in accordance with BS 7671:2018 (IET Wiring Regulations) as amended to 2020.

It should be noted that cables concealed within trunking and conduits, under floors, in roof spaces, and generally within the fabric of the building or underground, have not been inspected unless specifically agreed between the client and inspector prior to the inspection. An inspection should be made within an accessible roof space housing other electrical equipment.

## SUMMARY OF THE CONDITION OF THE INSTALLATION

See page 3 for a summary of the general condition of the installation in terms of electrical safety.

Overall assessment of the installation in terms of its suitability for continued use\*:

**SATISFACTORY**

\* An unsatisfactory assessment indicates that dangerous (Code C1) and/or potentially dangerous (Code C2) conditions have been identified.

## RECOMMENDATIONS

Where the overall assessment of the suitability of the installation for continued use on page 1 is stated as 'UNSATISFACTORY', I/We recommend that any observations classified as 'Code 1 - Danger Present' or 'Code 2 - Potentially dangerous' are acted upon as a matter of urgency.

Investigation without delay is recommended for observations identified as 'FI - Further Investigation Required'.

Observations classified as 'Code 3 - Improvement recommended' should be given due consideration.

Subject to the necessary remedial action being taken, I/we recommend that the installation is further inspected and tested by:

5 Years or change of tenant/owner

Note: The proposed date for the next inspection should take into consideration the frequency and quality of maintenance that the installation can reasonably be expected to receive during its intended life. The period should be agreed between relevant parties.

## LANDLORD / HOME OWNER GAS SAFETY RECORD

SERIAL NO

CP12 8745968



This form allows the recording of the results of the required checks as defined by the Gas Safety (Installation and Use) Regulations.

Chimney systems were inspected visually and checked for satisfactory evacuation of products of combustion, a detailed internal inspection of the chimney system has not been carried out. The information recorded on this form does not confirm that the installation was installed by a person licensed by Gas Safe Register nor that the installation complies with any relevant Building Regulations. For appliances not owned by the Landlord, where only visual checks are undertaken, recording a YES in 'Appliance Safe' is based only on a visual check for obvious defects with no physical tests completed.

## JOB ADDRESS

Report Action on Defects (YES/NO) YES

Name:

Address:

181 Avoncroft Way  
Bicester  
OXON

Postcode:

Tel No:

Name:

Address:

Postcode:

Tel No:

## REGISTERED BUSINESS DETAILS

Reg No:

Company:

Address:

Postcode:

Tel No:

## APPLIANCE DETAILS

|   | Location | Appliance Type | Make  | Model    | No. of Appliances Listed Below |
|---|----------|----------------|-------|----------|--------------------------------|
| 1 | Kitchen  | Boiler         | Daarc | 25 SL    | 2                              |
| 2 | Kitchen  | Hob            | Beko  | HQ6223SX |                                |
| 3 |          |                |       |          |                                |
| 4 |          |                |       |          |                                |

## INSPECTION / SAFETY CHECKS

## CHIMNEY CHECKS

## COMBUSTION READINGS(S)

## SUMMARY

## AUDIBLE CO DETECTOR

|   | Ventilation Satisfactory (Yes/No) | Operating Pressure or Heat Input (mbarkW) | Safety Device(s) Correct Operation (Yes/No) | Visual Condition Satisfactory (Yes/No/NA) | Chimney/Flue Performance (Pass/Fail/NA) | Initial (If Applicable) | Final (If Applicable) | Appliance Serviced (Yes/No) | Appliance Safe (Yes/No) | Correctly Installed (Yes/No/NA) | In Date (Yes/No/NA) | Test Satisfactory (Yes/No/NA) |
|---|-----------------------------------|---|---|---|---|-------------------------|-----------------------|-----------------------------|-------------------------|---------------------------------|---------------------|-------------------------------|
| 1 | Y                                 | 20.4                                      | Y   | Y   | P                                       | 00005                   | 00005                 | Y                           | Y                       | Y                               | Y                   | Y                             |
| 2 | Y                                 | 20  | Y   | Y   | NA                                      | —                       | —                     | N                           | Y                       | Y                               | Y                   | Y                             |
| 3 |                                   |   |   |   |   |                         |                       |                             |                         |                                 |                     |                               |
| 4 |                                   |   |   |   |   |                         |                       |                             |                         |                                 |                     |                               |

## APPLIANCE DEFECT(S) IDENTIFIED

## REMEDIAL ACTION TAKEN

## INSTALLATION GENERAL (Yes/No/NA)

Emergency Control Valve Satisfactory.

Gas Installation Pipework Satisfactory (Visual):

Meter / Cylinder Installation Satisfactory (Visual):

Gas Installation Correct Materials Used (Visual):

Main Protective Bonding Satisfactory (Visual):

Gas Tightness Test Satisfactory:

## DETAILS OF OTHER WORK CARRIED OUT (e.g. services etc.)

## OBSERVATIONS / COMMENTS / REMEDIAL WORK REQUIRED

NEXT

SAFETY CHECK  
DUE BEFORE

28.05.25

Issued by:

Print Name:

I GEIMES

Signed:

28.05.24

Licence No:

Issue Date:

28.05.24

Received by:

Print Name:

Signed:

Tenant / Home Owner / Landlord / Other (please state):

No one present at the time of visit