



Periodic Inspection Report for an Electrical Installation

BOOK OF 10

GUIDELINES FOR PERIODIC INSPECTION REPORT

SCOPE

The report is intended to identify the condition of the fixed electrical installation. Note that fixed appliances e.g. night storage heaters, electric cookers are not part of the fixed installation. It is important that the person ordering the test is aware of this fact and the tester should take reasonable steps to record that this particular information has been given to the person ordering the inspection. Cables concealed within trunking and conduits within the fabric of the building or underground cannot in most circumstances be inspected. This fact is recorded on the report. On page four observations and recommendations are made based on a combination of visual inspection and electrical measurements (see part 6, National Rules for Electrical Installations, current edition).

PROCEDURE

All sections of the report must be completed. The layout of the form is intended to facilitate a standard approach to inspection. Please note all instructions carefully. On pages two and three any of the numbered questions answered "NO" must be referred to the comment section of the report. It is permissible in larger installations to use sampling methods for inspecting switches, sockets, etc. It is important however to ensure that an adequate ratio and sampling method is used in order that an accurate report may be written. The comment section should always state if this system has been used and the ratio inspected.

Consideration should be given to using clear and unambiguous recommendations in the comment section of the report keeping in mind that in most circumstances the section in question may be read by a non-technical person. Where additional comments need to be made please use numbered continuation sheets.

RECOMMENDATIONS FOR REMEDIAL WORKS

Following the periodic inspection of the installation a schedule of defects, damage, deterioration and potentially dangerous non-compliances shall be provided together with recommendations for remedial works. On page four of the report a numbering system is used to indicate to the person(s) responsible for the installation the action recommended. The numbering system is as follows: (1) Requires urgent attention. (2) Requires improvements, (3) Requires some attention, (4) Does not comply with current National Rules for Electrical Installations. Note that using (4) does not necessarily imply that the electrical installation inspected is unsafe. It is most important that this number system is used for all reports. Where there are serious defects in the electrical installation consideration should be given to additional notification to the person responsible for the installation using registered mail. The frequency of periodic inspection and testing shall be determined by the type of installation, its use and operation, the frequency of maintenance and the external influences to which it is subjected.

DISTRIBUTION OF THE REPORTS

The original report (white copy) is intended for the person ordering the inspection. The duplicate copy (yellow) should be retained by the electrical contractor responsible for the report.

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| Date | Periodic Inspection | n Report for an | Electrical Installation PR No: |
|------------------------------------|---|--------------------------------|---|
| REGISTERED CONTRACTOR Name Address | | SAFE | INSTALLATION DETAILS: Occupant Name/Trading asAddress |
| Reg No | | ion Approx Age | Occupant In Attendance ? Yes No |
| | PLEASE CIRCLE A | NSWERS OR TICK B | OXES AS APPROPRIATE |
| Installation Category? | Domestic | Commercial | Industrial Other (specify) |
| Reason for Inspection? | Insurance Inspection 🔲 | | If Other (specify) |
| * N.B. Cables concealed within to | | ric of the building or underg | ☐ NO (see partial inspection details below) ground have not been inspected unless stated otherwise. |
| | | | |
| TYPE OF SYSTEM EARTHI | NG : TNCS, TT, TNS hase ☐ Three Phase ☐ L 1. | · | L 3. |
| Max prospective S/C curren | nt A Main Isolation** a | and overcurrent device | type ? NONE SWITCH FUSE MCB MCCB |
| Nominal rating A | ** If a main RCD is used | d as a main isolating de | evice the following details are required Rated current InA |
| Tripping current Ln_ | mA | nission for Energy Regulation. | PAGE 1 of |



Periodic Inspection Report for an Electrical Installation

PR No:

| N.B. Any Questions answered "no" n | nust be referred to in the commen | t section of this report. | ALL QUESTIONS | MUST BE ANSWERED |
|------------------------------------|-----------------------------------|---------------------------|----------------------|------------------|
| | PLEASE TICK BOX AS | S APPROPRIATE | | |

| 1. | Have all electrical outlets / accessories been inspected? Yes \(\bigcap\) No \(\bigcap\) | | TRIBUTION BO | ARD/S | |
|----|---|----------|-------------------------|-----------------------|-----------------------|
| 2. | Are all outlets / accessories undamaged? Yes ☐ No ☐ | 15. | Labelled correc | ctly? Yes 🔲 No 🔲 | |
| 3. | Are all live parts covered? Yes □ No □ | 16. | Located correc | tly? Yes 🔲 No 🔲 | |
| | EARTHING/BONDING DETAILS | 17. | Sub circuit isol | ation & overcurren | t device type? |
| 4. | If TNCS is main protective conductor connected? | | Fuse 🔲 Mcb 🕻 | ב | |
| | Yes | 18. | Are all devices | correctly rated for | S/C & O/L? |
| 5. | If TNCS is main protective conductor connected? Yes No N/A If present is it the correct size? Yes No N/A Farth Electrode Inspection Chamber? Yes No | | Yes 🔲 No 🔲 | | |
| 6. | Earth Electrode Inspection Chamber? Yes No | 19. | Circuit sequence | ce correct for P , N, | +E? Yes 🔲 No 🗋 |
| 7. | If yes Is earth electrode visible? Yes \(\bigcap\) No \(\bigcap\) | 20. | RCD's | | |
| 8. | If yes Is protective tape used? Yes ☐ No ☐ | Cir | cuit description | Tripping current | Longest tripping time |
| 9. | If visible is the earthing conductor the correct size? Yes \square No \square | <u> </u> | Sockets Electric Shower | 30 mA | ms |
| 10 | . Is all main equipotential bonding correct? Yes 🔲 No 🔲 N/A 🔲 | <u> </u> | Liectric Sriower | 30 IIIA | ms |
| 11 | . All supplementary bonding correct & connections verified? | | | | |
| | Yes \(\bigcap \) No \(\bigcap \) N/A \(\bigcap \) | | | | |
| 12 | . Protective Earthing sleeved where appropriate? Yes 🔲 No 🔲 N/A 🔲 | | | | |
| 13 | . Polarity+earthing of all switches/outlets correct? Yes 🔲 No 🔲 | | | | |
| | . All metallic switches / outlets earthed? Yes \(_\) No \(_\) R 2016 This document should not be copied or reproduced in any form or manner without the expressed permission of the Commission for Energy Regulation. | | | | PAGE 2 of |



Periodic Inspection Report for an Electrical Installation

PR No:

| ELECTRIC Against a cross decision and a cross decis | |
|--|--|
| GENERAL | SUMMARY TEST DATA |
| 21. Correct cable colours used at the time of installation? Yes \square No \square | Min Insulation ResistanceMΩ |
| 22. Are cables in good condition? Yes \(\bigcap\) No \(\bigcap\) | Max Resistance of protective conductor Ω |
| 23. Cables correctly selected? Yes ☐ No ☐ | Max fault loop impedance $\underline{\hspace{1cm}}\Omega$ and type and size of |
| 24. Correct routing of cables in attic area? Yes \(\bigcap\) No \(\bigcap\) N/A \(\bigcap\) | associated protective device |
| 25. Cables correctly installed where visible? Yes \(\bigcap\) No \(\bigcap\) | |
| 26. All excessive heating effects from luminaires avoided? Yes \(\sigma\) No\(\sigma\) | TEST INSTRUMENT SERIAL NUMBERS : |
| 27. Correctly selected accessories & switches? Yes ☐ No ☐ | Continuity Tester |
| 28. Are they in a good condition? Yes \(\bigcap\) No \(\bigcap\) | Insulation Resistance Tester |
| 29. Are they correctly located? Yes ☐ No ☐ | Loop Impedance Tester |
| 30. Are they suitable for their environment? Yes \square No \square | RCD Tester |
| QUALITY OF WORKMANSHIP: | DECLARATION I/We the undersigned are responsible for the inspection and testing of the electrical installation described on page 1. of this report. |
| Very Good □ | I/We confirm to the best of my /our knowledge that tests and observations made on pages 1, 2, 3, 4, & represent an |
| Satisfactory | accurate assessment within the limits specified, of the condition of the electrical installation. |
| Poor | |
| | Inspected and tested by (Signed) |
| | (BLOCK CAPITALS) |
| | This report is issued and signed by the person responsible for the inspection of the installation concerned. This report should be used only for the domestic and small commercial installations. The CER or Safe Electric is not responsible for the electrical installation or for the accuracy of the information given on the report. PAGE 3 of |

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Periodic Inspection Report for an Electrical Installation OBSERVATIONS AND RECOMMENDATIONS (tick boxes as appropriate)

PR No:

(Note subject to the limitations specified on Page 1 of this report)

| | ☐ NO REMEDIAL WORK IS REQUIRED ☐ THE FOLLOWING OBSERVATIONS ARE MAD | E |
|---------------------|---|--|
| REF NO. | COMMENTS (USE NUMBERED CONTINUATION SHEETS IF NECESSARY) | Recommendations As detailed below ● |
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| | | |
| responsi (1) REG | he following numbers, as appropriate, is allocated to each of the observations made above to indicate to the installation the action recommended. EDITION (2) REQUIRES IMPROVEMENTS (3) REQUIRES SOME ATTENTION (2) REQUIRES UNTRESTALLATIONS* *THIS DOES NOT NECESSARILY IMPLY THAT THE ELECTRICAL INSTALLATION INSPECTED IS UNSAFE. | o the person(s) |
| | that all observations requiring "urgent attention" have been completed without delay, I/We recommend that this cted and tested after an interval of not more than months / years. (N.B. Future national requirements may modify the s | |
| | Certifier No. Date | |
| (BLOCK CA | APITALS) | PAGE 4 of |