



27 JUL 2022

This report is not valid if the serial number has been defaced or altered

25589484

IPN18C

ELECTRICAL INSTALLATION CONDITION REPORT

Issued in accordance with RS 7671: 2018 – Requirements for Electrical Installations

CONTRACTOR		1350eu in decordance with De 1011. 2010
PART 1 : DETAILS OF THE CONTRACTOR, CLIENT AND INSTALLATION		
DETAILS OF THE CONTRACTOR Registration No: 010706000 Branch No: 000 Trading Title: Smail & Richards Electrical Contractors Ltd Address: Top Floor C Store, Halcyon House, West Hill, St. Helier, Jersey Postcode: JE2 3HB Tel No: 01534 723503	DETAILS OF THE CLIENT Contractor Reference Number (CRN): 171870 Name Brunel Management Limited Address: Brunel Chambers, Devonshire Place, St. Helier, JERSEY Postcode: JE2 3RD Tel No: 01534750200	Address: Hat 20, Berkshire Court, La Motte Street, St. Helier, JERSEY
PART 2: PURPOSE OF THE REPORT		
Purpose for which this report is required: Scheduled report		
Date(s) when inspection and testing was carried out: 01/07/2022 - 07/07/2022 } Records available: (
PART 3 : SUMMARY OF THE CONDITION OF THE INSTALLATION		
General condition of the installation (in terms of electrical safety): The general condition of the installation is good		
Estimated age of electrical installation: (16) years Evidence of	f additions or alterations: () Overall assessment of the	installation is: Satisfactory 상대왕전비왕부조단이다y* (delete as appropriate)
PART 4: DECLARATION		
INSPECTION AND TESTING I, being the person responsible for the inspection and testing of the electrical installation, particulars of which are described in PART 7, having exercised reasonable skill and care when carrying out the inspection and testing of the electrical installation taking into account the		
existing installation, hereby CERTIFY that the information in this report, including the observations (page 2) and the attached schedules, provides an accurate assessment of the electrical installation data.		
stated extent of the installation and the limitations on the inspection and testing Name (capitals): JAMES NORTON	Signature:	Date:
REVIEWED BY THE REGISTERED QUALIFIED SUPERVISOR FOR THE APPROVED CONTRACTOR		
Name (capitals):	Signature:	Date:

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^{*}An unsatisfactory assessment indicates that dangerous (CODE C1) and/or potentially dangerous (CODE C2) conditions have been identified in PART 6, or that Further Investigation (CODE FI) without delay is required.