



PORTABLE BUILDING PRE-DELIVERY INSPECTION AND TESTING REPORT

ADDRESS OF DEPOT

Silver Birches
 Highland Avenue
 Wokingham
 RG41 4SP
 DEPOT TEL No: 01189 894 652

PURPOSE OF REPORT

To verify that the electrical installation for the portable building complies with BS 7671:2008 and is in a satisfactory condition for hire.

CABIN SIZE 14 Bay

SERIAL NUMBER 3064

INSPECTION AND CONTINUITY **SATISFACTORY** ✓

Check the presence of protective bonding conductors (✓) tick box for satisfactory ✓

Inspection of accessories for soundness of fixings, breakages, missing parts and signs of overheating ✓

Inspection of switchgear for soundness of fixings, breakages, missing parts and signs of overheating ✓

All conductor connections are sound, labelled and correctly identified ✓

Disconnect and remove any non-original installation equipment/supply wiring to consumer unit ✓

TESTING (ENSURE EVERY CIRCUIT IS TESTED) **SATISFACTORY** ✓

Continuity of protective bonding conductor(s) (✓) tick box for satisfactory ✓

CIRCUIT DETAILS				TEST RESULTS													
Circuit number	Circuit designation	Number of points served	Circuit conductors: csa		Rating	Circuit impedances (Ω)				Insulation resistance			Polarity	RCD operating times		Functional RCD Test	
			Live	cpc		Ring final circuits only (measured to end)			All circuits		Line/Neutral	Line/Earth		Neutral/Earth	At 1An		At 51An
			mm ²	mm ²		r ₁ Line	r _n Neutral	r ₂ cpc	r ₁ +r ₂	R ₂	MΩ	MΩ		MΩ	ms		ms
1	Water heater	1	1.5	1.5	10	✓	✓	✓	0.03	M	✓200	✓200	✓200	✓	27.1	18.2	✓
2	Sockets	2	1.5	1.5	10	✓	✓	✓	0.21	M	✓200	✓200	✓200	✓			
3	Left lights	7	1	1	6	✓	✓	✓	0.28	M	✓200	✓200	✓200	✓			
4	Service light	1	1	1	6	✓	✓	✓	0.18	M	✓200	✓200	✓200	✓			
5	Right lights	7	1	1	6	✓	✓	✓	0.29	M	✓200	✓200	✓200	✓			
6																	
7																	
8																	
9																	
10																	

Function testing of appliances/circuits (✓) tick box for satisfactory ✓

TEST INSTRUMENTS SERIAL NUMBERS

Continuity _____ Insulation Resistance _____ RCD _____ Loop _____ Multi-Function Tester _____

COMMENTS/REMEDIAL WORK COMPLETED

Signature of competent person Name of competent person (block capitals) **CRAIG OWEN** Date **10-2-17**

NEXT INSPECTION

This unit should next be inspected not more than 12 months from date of the latest Electrical Installation Certificate/Periodic Inspection Report. Date **10-2-18**

IMPORTANT NOTICE TO HIRER - This unit will need to be inspected and tested in accordance with BS 7671:2008 once a supply is connected. This inspection and testing should be carried out by a competent person and a relevant report produced. Please see notes for recipients on the following page.