



Standard Contract & Advice Documents



Project Management

Installation and commissioning sheet for electrical equipment

Using this document

The highlighted areas indicate where you need to add your company details and then simply insert your logo in place of the ceda logo.



To be branded with name, address and contact details of the ceda member.

| Customer | | Installation site if different | |
|-----------|-----------|--------------------------------|--|
| Name | | | |
| Address 1 | | | |
| Address 2 | | | |
| Address 3 | Post code | | |

| Date of installation | Installation Technician(s) Name(s) | Job Reference number | Appliance to be installed | |
|----------------------|------------------------------------|----------------------|---------------------------|--|
| | | | | |

| Electrical installation to point of connection (fixed wiring) | | | | | | |
|---|--------|----------------------------|----------------------------------|--------|--------|--------|
| Distribution board correctly | Yes/No | Test certificate available | | Yes/No | Dated | |
| labelled | | | | | | |
| If no, can the customer confirm the date of the last fixed wiring | | | | Yes/No | Date | |
| inspection | | | | | | |
| Is an RCD in place in the electrical Yes/N | | | If Yes, has this been tested and | | | Yes/No |
| supply | | working? | | | | |
| Is the electrical supply adequate for the appliance to be installed? | | | | | Yes/No | |
| Is the local isolator accessible and remain accessible after installation | | | | | Yes/No | |

| Other services | | |
|--------------------|------------|---|
| Are other services | s required | ? |
| Water/Drainage | Yes/No | If Yes, confirm below with readings that these are OK – Pressure, Flow Rate, Tank/Mains, |
| | | Hardness |
| Gas | Yes/No | If Yes, confirm below with readings that these are OK – Pipe size, Local Isolation valve, Pressure |
| | | |
| Ventilation | Yes/No | If Yes, confirm below that this has been checked by a ventilation engineer as being adequate. |

| Installation of | the appliance | | | | |
|---|---------------|---------|------------|------------|-----------------------|
| Has the installation been carried out in accordance with the manufacturer's instructions? | | | | | Yes/No |
| If No, explain w | rhy. | | | | |
| Record the follo | owing | | | | |
| Supply | Current | Current | Earth | Insulation | Main |
| voltage | rating | drawn | Continuity | | euipotential bonding? |
| Single phase | | | | | |
| volts | amps | amps | ohm | M.ohm | Yes/No |
| Three phase | | | | | |
| volts | | | | | |
| P1 | amps | amps | ohm | M.ohm | Yes/No |
| P2 | amps | amps | ohm | M.ohm | Yes/No |
| P3 | amps | amps | ohm | M.ohm | Yes/No |

| Certification | Certification | | | | |
|---------------|--|--------|--|--|--|
| Gas | Has the gas equipment been installed in accordance with BS 6173:2020 ? | Yes/No | | | |
| Water | Has the water connection(s) been made in accordance with the Water Supply (Water Fittings) Regulations 1999 or equivalent regulations for Scotland or Northern Ireland | Yes/No | | | |

| Testing and commissioning of the appliance | | | |
|---|--------|--|--|
| Has the appliance been tested and commissioned in accordance with the | Yes/No | | |
| manufacturer's instructions | | | |
| Comments | | | |
| | | | |
| | | | |
| | | | |
| | | | |