

Home Safety Certificate

This Home Safety Certificate confirms that the assessments listed below have been successfully completed to help ensure the avoidance of utility related hazards and validate the continued safety of the property specified.

These general checks are designed to provide an appropriate home safety framework under most circumstances. However, if your tenants are vulnerable, elderly or have a disability, special consideration should be given to determine whether additional checks

1 Check to confirm the presence of a working smoke alarm on each floor of the house, tested to ensure it is in proper working order on the day the tenancy begins.¹
Please tick to confirm Date test carried out Proposed retest date
It is recommended that all alarms are tested annually to ensure the ongoing safety of your tenants.

2 Check to confirm an Electrical Installation Condition Report (EICR) has been carried out by a competent, registered electrician with experience of carrying out inspecting and testing within the last 5 years or within the time frame recommended on the EICR. (Find competent electricians at www.homesafetyguidance.co.uk)²
Please tick to confirm Date carried out Next EICR due

3 Check to confirm a visual electrical inspection has taken place within the last year, and a Portable Appliance Test has been undertaken in line with a risk assessment, and that any urgent remedial action noted has been carried out. (Visual electrical checklist and guidance can be downloaded from www.homesafetyguidance.co.uk)
Please tick to confirm Date carried out Next visual electrical inspection due Next Portable Appliance Test

4 Check to confirm that a Gas Safety Certificate has been completed in the last year. (Find registered gas engineers at www.gassaferegister.co.uk)³
Please tick to confirm Date carried out Next Gas Safety Certificate due
 Not applicable (a gas burning appliance is not present)

5 Check to confirm that an Annual Safety Report for any solid fuel or oil combustion appliance has been completed in the last year by a competent, registered installer. (Find a registered installer at www.competentperson.co.uk)
Please tick to confirm Date carried out Next Certificate due
 Not applicable (a solid fuel or oil combustion appliance is not present)

6 Check to confirm that a working carbon monoxide alarm compliant with British Standard EN 50291 is in place when a carbon burning appliance is present in the property, tested to ensure it is in proper working order on the day the tenancy begins⁴
Please tick to confirm Date test carried out Proposed retest date
 Not required
It is recommended that all alarms are tested annually to ensure the ongoing safety of your tenants.

7 Check to confirm an up-to-date Legionella Risk Assessment has been completed in line with HSE guidance. (More information can be found at www.hse.gov.uk/legionnaires/what-you-must-do.htm)^{3,5}
Please tick to confirm Date risk assessment carried out Next risk assessment due

Property Address:

I, the landlord/principal duty holder (delete as appropriate), confirm that the above checks have been carried out for the property specified above:

Signature:

Print name:

Date: / /

N.B. The current Visual Electrical Checklist, Electrical Installation Condition Report, Gas Safety Certificate, Annual Combustion Appliance Safety Report and Legionella Risk Assessment, which you have signed to state you are in possession of (if relevant to you), are supporting documents that you may need to produce to demonstrate the validity of this certificate. It is recommended that you keep these with this certificate and be prepared to make them available if required or requested by your tenant, insurance company, mortgage provider or local authority.

¹ This is a legal requirement for all tenancies which commence after the 1 October 2015.

² This is a legal requirement in Scotland and considered best practice under the mandatory RentSmart scheme for landlords in Wales.

³ This is a legal requirement.

⁴ For tenancies starting after the 1 October 2015, this is a legal requirement in properties which contain a solid fuel burning appliance which is situated in a room used wholly or partly as living accommodation. This is highly recommended when there is a gas or oil burning appliance installed.

⁵ Landlords have a duty to carry out a full risk assessment on their properties, checking for conditions that can encourage the spread of Legionella, and subsequently mitigating or controlling such conditions.

Additional Home Safety Certificate

This Additional Home Safety Certificate confirms that the checks listed below have been successfully completed to help ensure the safety of those living within a property. This certificate should be completed at the start of a new tenancy.

These general checks are designed to provide an appropriate home safety framework under most circumstances. However, if your tenants are vulnerable, elderly or have a disability, special consideration should be given to determine whether additional checks may be required.

1 Check for the presence of a Thermostatic Mixing Valve (TMV) on baths.

- TMV is in place
 TMV is not in place but the tenant has been made aware
 Unable to verify, but the tenant has been made aware of potential risk

2 Check to confirm a fall prevention risk assessment has been carried out. (Fall prevention checklists can be downloaded from www.homesafetyguidance.co.uk)

Please tick to confirm Date check was carried out Proposed retest date

3 Check to confirm the installation of safety devices for blind cords.⁴

Please tick to confirm Date check carried out
 Not applicable as no blinds present within the property

4 Check to confirm the tenant has been made aware of the fire escape strategy and exit routes.

Please tick to confirm

Property Address:

I, the landlord/principal duty holder (delete as appropriate), confirm that the above checks have been carried out for the property specified above:

Signature

Print name:

Date: / /

I, the tenant, confirm the results of the above checks have been discussed with me and I have been given appropriate advice where required.⁵

Signature

Print name:

Date: / /

N.B. The fall prevention risk assessment which you have signed to state you are in possession of is a supporting document that you may need to produce to demonstrate the validity of this certificate. It is recommended that you keep it with this certificate and be prepared to make it available if required or requested by your tenant, insurance company, mortgage provider or local authority.

⁴ For further information please visit the British Blinds and Shutter Associations website at www.bbsa.org.uk

⁵ If your house is occupied by multiple tenants a lead tenant should be identified to sign this document. In the event of the lead tenant vacating the property existing tenants are required to make the landlord aware so that an updated checklist can be completed and issued.