FESTIVE LIGHTS TEST CERTIFICATE

(to be completed by authorised electrical contractor or other responsible qualified person)

Sheet number ….. of ….. Village/ Town …….

Festive Light Unit		**Visual Inspection of Condition**			**Electrical Safety Testing**			**Load**
Ref. No.	Description	Pass	Fail	Date	Pass	Fail	Date	(Watts)

I certify that I have tested the above equipment in accordance with the requirements of BS 7671 and that the information given is correct.

Signed: ……. Date: ……. Details of qualification/competence to undertake testing:

Print Name: ……..... …….

On behalf of: …… …….