

SAFETY CERTIFICATES

Property Address: [PROPERTY ADDRESS]

Tenancy Start Date: [START DATE]

IMPORTANT NOTICE TO TENANTS

This document contains information about safety certificates for your rented property. These certificates confirm that various safety checks have been carried out as required by law. Copies of all certificates listed below have been provided to you. Please keep this document and all certificates safe for future reference.

1. GAS SAFETY CERTIFICATE

Certificate Number: [GS-XXXXX]

Issue Date: [DATE]

Expiry Date: [DATE] (12 months from issue)

Inspection Conducted By: [ENGINEER NAME]

Gas Safe Register Number: [REGISTRATION NUMBER]

Equipment Covered:

- Gas Boiler
- Gas Hob/Cooker
- Gas Fire (if applicable)
- Gas Water Heater (if applicable)

Key Information:

- This certificate confirms all gas appliances, pipework, and flues have been checked and are safe to use
- A new inspection will be carried out annually
- The landlord will provide you with a new certificate after each inspection
- You must allow access for this essential safety check

Tenant Responsibilities:

- Report any gas smell, fumes, or concerns immediately to:

- National Gas Emergency Service: 0800 111 999
 - Landlord/Agent: [CONTACT DETAILS]
 - Never block ventilation points for gas appliances
 - Be aware of the symptoms of carbon monoxide poisoning: headaches, dizziness, nausea, breathlessness, collapse, loss of consciousness
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2. ELECTRICAL INSTALLATION CONDITION REPORT (EICR)

Certificate Number: [EICR-XXXXXX]

Issue Date: [DATE]

Valid Until: [DATE] (5 years from issue)

Inspection Conducted By: [ELECTRICIAN NAME]

Qualification/Registration Number: [REGISTRATION NUMBER]

Overall Assessment:

- Satisfactory (Code C1) - No remedial work required
- Satisfactory (Code C2) - Remedial work completed on [DATE]
- Satisfactory (Code C3) - Improvements recommended but not mandatory

Key Information:

- This certificate confirms the fixed electrical installations in the property have been inspected and tested
- The electrical installation will be reinspected at least every 5 years
- Any Category 1 (C1) or Category 2 (C2) hazards identified have been remedied
- The landlord will provide you with a new certificate after each inspection

Tenant Responsibilities:

- Report any electrical concerns promptly to the landlord/agent
 - Do not overload electrical sockets
 - Do not attempt to repair or modify any fixed electrical installations
 - Ensure your own appliances are safe to use
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3. ENERGY PERFORMANCE CERTIFICATE (EPC)

Certificate Number: [EPC-XXXXX]

Issue Date: [DATE]

Valid Until: [DATE] (10 years from issue)

Energy Rating: [RATING] (A-G scale)

Energy Efficiency Information:

- Current Energy Efficiency Rating: [RATING] (e.g., D)
- Potential Energy Efficiency Rating: [RATING] (e.g., B)
- Current Environmental Impact Rating: [RATING] (e.g., D)
- Potential Environmental Impact Rating: [RATING] (e.g., B)

Key Information:

- The minimum legal EPC rating for rented properties is E
 - This certificate provides information about the energy performance of the property
 - It includes recommendations for improving energy efficiency
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4. SMOKE AND CARBON MONOXIDE ALARM DECLARATION

Declaration Date: [DATE]

Smoke Alarms:

- Number of smoke alarms installed: [NUMBER]
- Locations: [LIST LOCATIONS]
- All alarms tested and functioning: Yes / No
- Type of alarms: [BATTERY/MAINS WIRED]
- Date of most recent test: [DATE]

Carbon Monoxide Alarms:

- Number of CO alarms installed: [NUMBER]
- Locations: [LIST LOCATIONS]
- All alarms tested and functioning: Yes / No
- Type of alarms: [BATTERY/MAINS WIRED]
- Date of most recent test: [DATE]

Key Information:

- Smoke alarms are required on each floor of the property
- Carbon monoxide alarms are required in any room with a solid fuel appliance or gas appliance
- Alarms have been tested at the start of the tenancy and are working

Tenant Responsibilities:

- Test all alarms monthly and report any issues immediately
 - Never remove batteries or disable alarms
 - Replace batteries when required (if battery-operated)
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5. LEGIONELLA RISK ASSESSMENT

Assessment Date: [DATE]

Conducted By: [NAME/COMPANY]

Risk Level Identified: Low / Medium / High

Key Findings:

- [SUMMARY OF ASSESSMENT]
- [ANY IDENTIFIED RISKS]
- [ACTIONS TAKEN]

Key Information:

- Legionella bacteria can cause serious respiratory infections
- The risk in domestic rental properties is generally low
- A risk assessment has been carried out as required by the Health and Safety Executive

Tenant Responsibilities:

- Run taps and showers that aren't regularly used for 2 minutes each week
 - Clean and descale shower heads quarterly
 - Maintain water temperatures (hot water should be hot, cold water should be cold)
 - Report any issues with water temperature or discoloration
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6. FIRE SAFETY RISK ASSESSMENT (for HMO/multi-unit properties)

Assessment Date: [DATE]

Conducted By: [NAME/COMPANY]

Next Assessment Due: [DATE]

Fire Safety Equipment:

- Fire extinguishers: [LOCATIONS]
- Fire blankets: [LOCATIONS]
- Fire doors: [LOCATIONS]
- Emergency lighting: [LOCATIONS]
- Fire escape routes: [DESCRIPTION]

Key Information:

- This risk assessment identifies fire hazards and people at risk
- It evaluates and removes/reduces risks where possible
- It provides information on fire escape routes and emergency procedures

Tenant Responsibilities:

- Keep fire doors closed
- Maintain clear escape routes
- Report any damage to fire safety equipment
- Follow fire safety procedures in an emergency

7. FURNITURE AND FURNISHINGS SAFETY DECLARATION

Declaration Date: [DATE]

This is to certify that all upholstered furniture, beds, mattresses, pillows, and cushions provided in the property comply with the Furniture and Furnishings (Fire Safety) Regulations 1988 (as amended).

All items containing upholstery have the appropriate permanent fire safety label attached.

8. DECENT HOMES STANDARD COMPLIANCE

Assessment Date: [DATE]

Conducted By: [NAME/COMPANY]

The property meets the Decent Homes Standard, which requires:

1. It meets the current statutory minimum standard for housing
2. It is in a reasonable state of repair
3. It has reasonably modern facilities and services
4. It provides a reasonable degree of thermal comfort

Key Findings:

- [SUMMARY OF ASSESSMENT]
 - [ANY ISSUES IDENTIFIED AND ADDRESSED]
 - [IMPROVEMENTS PLANNED]
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LANDLORD DECLARATION

I/We [LANDLORD NAME(S)] confirm that:

1. All safety certificates and declarations listed in this document are accurate and up to date
2. All necessary safety checks have been carried out as required by law
3. The property meets all relevant safety standards and the Decent Homes Standard
4. Any safety issues identified have been or will be promptly addressed
5. Future safety checks will be carried out as required and certificates renewed before expiry

Signed: _____ Date: _____

Print Name: _____

TENANT ACKNOWLEDGMENT

I/We [TENANT NAME(S)] confirm that:

1. I/We have received copies of all the safety certificates listed in this document
2. I/We have been shown the location of all smoke and carbon monoxide alarms
3. I/We have been informed of emergency procedures and contact details
4. I/We understand my/our responsibilities regarding safety in the property

Signed: _____ Date: _____

Print Name: _____

Signed: _____ Date: _____

Print Name: _____

EMERGENCY CONTACT INFORMATION

Gas Emergency: 0800 111 999

Electrical Emergency: [CONTACT DETAILS]

Landlord/Agent Emergency Contact: [CONTACT DETAILS]

Local Fire Service (non-emergency): [CONTACT DETAILS]