

# PAT Testing Certificate

Certificate Number \_\_\_\_\_

Issue Date \_\_\_\_\_

## TESTING ORGANISATION

Tester Name

Qualification (e.g. C&G 2377-22)

Company (name & registration number)

Company Address

Contact (phone, email)

## CLIENT / PREMISES

Client Name

Site Address

Specific Area Tested (where applicable)

## TESTING DETAILS

Date(s) of Test

PAT Tester Used (make/model/serial)

Tester Calibration Date

Calibration Certificate Ref

**Standards Applied:** IET Code of Practice (5th edition) · Electricity at Work Regulations 1989 · HSG107

# PAT Testing Certificate

## SUMMARY OF RESULTS

TOTAL  
TESTED

PASSED

FAILED

REMOVED  
FROM SERVICE

FOR  
REPAIR

## RECOMMENDATIONS

Recommended Next Test Date

General Observations

**Appended:** Full schedule of tested appliances with individual results.

\_\_\_\_\_  
Tester Signature

\_\_\_\_\_  
Date

*This certificate is issued in accordance with the Standards Applied as listed on Page 1. Retain alongside the appended schedule for the duration of the next testing interval.*