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| **PROPERTY INDUCTION FORM – PAT**  **To be completed by all competent (trained, knowledgeable and experienced) portable appliance testers** | | | | | | | | | |
| Group: | | | Type of property: | | | | | | |
| Address: | | | | | | | | | |
| Inductee name (block letters): | | | | | | | | | |
| Assessor name (block letters): | | | | | | | | | |
| Any paid member of staff or volunteer providing a portable appliance testing service for electrical goods that are to be sold must complete this form. Once complete it should be attached to their existing induction form and reviewed if needed at the next refresher training.  The assessor can be someone in the group with experience of the property and its legal requirements. Both must go through the areas below in conjunction with the relevant risk assessments, marking the box on the right hand side “Y - Yes” or “N - No”. | | | | | | | | | |
| **Subject** | | | | | | | Induction | Refresher | Refresher |
| 1 | I have read the HSV: 150 – Sales disclaimer that is displayed at the till - Y/ N | | | | | |  |  |  |
| 2 | I have read [HSG: 107](https://www.hse.gov.uk/pubns/books/hsg107.htm) – Maintaining portable electrical equipment 2013 and resolved any queries or concerns I have - Y/ N | | | | | |  |  |  |
| 3 | I have attended a formal PAT course. I recognise the right equipment needed to do the tests; have the ability to use this test equipment correctly and understand the test results and know what action to take if a piece of equipment passes or fails - Y/ N | | | | | |  |  |  |
| No list of official trainers is available; a local course should be selected that covers [sections 40 – 54 of the HSE guidance document HSG: 107](https://www.hse.gov.uk/pubns/books/hsg107.htm) | | | | | | | | |
| 4 | I have read and understood the following guidance (which has been agreed with the shop manager) and is on file and available to all portable appliance testers: | | | | | | | | |
| * The steps needed to complete a combined the HSE formal inspection and portable appliance test - Y/ N | | | | | |  |  |  |
| * The action to take whether equipment passes or fails - Y/ N | | | | | |  |  |  |
| * The process to be followed where faulty devices need to be disposed of - Y/ N | | | | | |  |  |  |
| 5 | When testing is taking place, there must be a controlled testing area in the shop. The testing area is: | | | | | | | | |
| * Clearly marked so other staff/ volunteers know not to enter while testing is taking place - Y/ N | | | | | |  |  |  |
| * Set up with the right equipment e.g. easy access to a socket; rubber mat to stand on; clear surface to work on; correct hand tools; correct type of portable appliance tester plus necessary equipment recommended on the training - Y/ N | | | | | |  |  |  |
| * Big enough to store equipment before and after testing - Y/ N | | | | | |  |  |  |
| 6 | All equipment that passes the test and is to be sold in the shop will be: | | | | | | | | |
| * In good working order and have all accessories such as leads and chargers - Y/ N | | | | | |  |  |  |
| * Up to date with current safety regulations; carry a CE mark or the manufacturer’s trademark and will have a set of operating and maintenance instructions - Y/ N | | | | | |  |  |  |
| * Tagged with an electrical safety “Pass” label (details complete) - Y/ N | | | | | |  |  |  |
| * Listed on HSV: 116A – Record of portable appliances to be sold by the group with all details complete - Y/ N | | | | | |  |  |  |
| 7 | All equipment that fails the test and is to be disposed of will be: | | | | | | | | |
| * Tagged with an electrical safety “Failed” label (details complete) so it is not put up for sale accidently - Y/ N | | | | | |  |  |  |
| * Listed on HSV: 116B – Record of portable appliances to be disposed of by the group with all details complete - Y/ N | | | | | |  |  |  |
| * Disposed of safely in line with the shop policy - Y/ N | | | | | |  |  |  |
|  | **Initial Portable Appliance Tester Induction** | | | | | | | | |
| 10 | Date induction complete: | | | | |  | | | |
| Name of inductee: |  | | Signature: |  | | | | |
| Name of assessor: |  | | Signature: |  | | | | |
| We process this information on the lawful basis of our legal obligation set out by the Health and Safety Executive and Central Government. We will share with other regulatory bodies or insurers if appropriate for reporting or claims processing. To find out how we use and manage your personal data, our full privacy notice is at [www.mssociety.org.uk/privacy](http://www.mssociety.org.uk/privacy). You can also call our Supporter Care team on 0300 500 8084 to get a copy. | | | | | | | | | |