



Construction Details and Visual Inspection Certificate

DCC2

To be completed by the installer and sent to the Local Roads Authority at least 5 working days prior to inspecting and testing.

Location

Installed to Drawing Number

Yes/No*

* All variations from the design layout or specification as given on Drawing Number _____ Issue _____ to be shown on an 'as installed drawing'. Give a brief description of any variations below.

Details of Installation

	Type 1	Type 2
Column Manufacturer/Cat No	<input type="text"/>	<input type="text"/>
Column Mounting Height	<input type="text"/>	<input type="text"/>
Lantern Manufacturer/Cat No	<input type="text"/>	<input type="text"/>
Lantern Wattage	<input type="text"/>	<input type="text"/>
Control Gear Manufacturer/Cat No	<input type="text"/>	<input type="text"/>
Control Gear Wattage	<input type="text"/>	<input type="text"/>
Cut Out Manufacturer/Cat No	<input type="text"/>	<input type="text"/>
HRC/MCB Rating	<input type="text"/>	<input type="text"/>
Lamp Manufacturer/Cat No	<input type="text"/>	<input type="text"/>
Ducting Manufacturer/Cat No	<input type="text"/>	<input type="text"/>
Cable Type/Diameter	<input type="text"/>	<input type="text"/>
Switchbox Manufacturer/Cat No	<input type="text"/>	<input type="text"/>
Distribution Board Manufacturer/Cat No	<input type="text"/>	<input type="text"/>
Contractor/Relay Manufacturer/Cat No	<input type="text"/>	<input type="text"/>
Rating	<input type="text"/>	<input type="text"/>
PEC Manufacturer/Cat No	<input type="text"/>	<input type="text"/>
Lux On	<input type="text"/>	<input type="text"/>
Ratio On/Off	<input type="text"/>	<input type="text"/>

Visual Inspection (Non-Electrical)

Mark for Satisfactory or for Unsatisfactory.

	During Election	On Completion
Location of Road Furniture as per Drawing	<input type="checkbox"/>	<input type="checkbox"/>
Planting Depth of Road Furniture as per Specification	<input type="checkbox"/>	<input type="checkbox"/>
Location of Cable/Duct as per Specification	<input type="checkbox"/>	<input type="checkbox"/>
Depth of Cable as per Specification	<input type="checkbox"/>	<input type="checkbox"/>
Paint Condition as per Specification	<input type="checkbox"/>	<input type="checkbox"/>
Verticality Correct	<input type="checkbox"/>	<input type="checkbox"/>
Optical Orientation Correct	<input type="checkbox"/>	<input type="checkbox"/>

I/We being the person(s) responsible (as indicated by my/our signatures below) for the construction of the street lighting installation, particulars of which are described on page 1 and 2 of the form **certify** that the said work for which I/we have been responsible is to the best of my/our knowledge and belief in accordance with the local authority's current specification for the installation of street lighting and the Regulations for Electrical Installations published by the Institution of Electrical Engineers, 16th Edition, except for the departures, if any, stated in this certificate.

The extent of liability of the signatory is limited to the work described above as the subject of this certificate.

Name **Position**
(Installer in block letters)

Company

Signature **Date**

Address

Tel

For and on behalf of

Official Use Only

Comments

Checked by: Name _____ Position _____ Date _____

Certificate Number _____