

SAFE and SURE

FIRE PROTECTION LTD.

Unit 2, Mill Lane, Langley Moor Ind. Est.,
Langley Moor, Durham DH7 8HE

Telephone : Business Hours (0191) 378 1153

Fax: (0191) 378 9296 Web: www.safeandsurefire.com

After Hours (0191) 386 8655

VAT No. 425 9964 11



DRY/WET RISER SERVICE REPORT

CONTACT: CHRIS TURNBULL

TEL No: 07769131380

Service Date: 30/4/25

Customer Order No:

Next Visit:

No. Per Year:

INVOICE ADDRESS

BELIEVE HOUSING

LOCATION ADDRESS

PARK AVENUE CLOSE
CROOK
DL15 9JR

CONTACT

TEL NO.

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External Equipment	Service/Checked?		Details	
Inlet cabinet checked?	✓			
Inlet glass checked?	✓			
Inlet sign checked?	✓			
Inlet breeching checked?	✓			
Valve cap checked?	✓			
Drain valve checked?	✓			
Internal Equipment	Service/Checked?		Details	
Outlet Valve (Quantity):	2			
Instantaneous washer:	✓			
Outlet plug:	✓			
Padlock/Strap:	✓			
Air release valve:	✓			
Pressure Test Details	Air	Water	Completion Checks	Yes / No
Inlet Pressure (Bar)			Service Label Fitted	✓
Top Valve Pressure (Bar)			Cabinet Sticker Fitted	✓
			System Drained & Secure?	YES

Comments

VISUAL INSPECTION OF DRY RISER SYSTEM
LEFT IN GOOD WORKING ORDER

TOTAL 150.00

VAT

TOTAL

- I/We requested the attendance of a Safe and Sure engineer and for the work to be carried out.
- I am satisfied with the work carried out by the Safe and Sure engineer.
- The system has been left in good working order unless detailed.
- I am authorised to sign on behalf of the customer.
- I/We will pay any charges for the work done either immediately or within 30 days or receipt of Safe and Sure's invoice or requested for payment.

I/We being the competent person(s) responsible (as indicated by my/our signatures below) for the servicing of the said system(s), particulars of which are set out below, CERTIFY for and on behalf of Safe and Sure that the said work for which I/We have been responsible complies, to the best of my/our knowledge and belief, with the recommendations of the current standards or customer specification expect for variations if any stated on this certificate.

Customer Representative:

Print Name:

Date:

Engineer Signature:

Print Name:

Date:

A Cowie
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30/4/25