

Pre-let risk assessment for Legionnaires' disease:

_____ (Property address)

1. Is the hot water temperature less than 20C (warm) or over 45C? (scalding)

Yes | Possibly | Not Known | Probably Not | No
(If other than No, arrange for remedial works)

2. Are there areas of pipe work where stagnant water occurs (deadlegs), e.g. pipes to a washing machine that is no longer used or long un-insulated hot water pipe runs?

Yes | Possibly | Not Known | Probably Not | No
(If other than No then arrange for investigation and/or remedial works)

3. Is there a header tank or tanks, not covered with a close fitting rigid cover with screened air vents?

Yes | Possibly | Not Known | Probably Not | No
(If other than No then arrange for remedial works)

4. Is the shower head (or heads) dirty?

Yes | Possibly | Not Known | Probably Not | No
(If other than No then clean and de-scale or replace)

5. Are there thermostatic mixing valves that set a favourable outlet temperature for legionella growth?

Yes | Possibly | Not Known | Probably Not | No
(If other than No then arrange for remedial works)

6. Has the property been empty for a week or more?

Yes | Possibly | Not Known | Probably Not | No
(If other than No then flush though all water pipes taps and showers)

7. Are there infrequently used outlets, e.g. showers, taps?

Yes | Possibly | Not Known | Probably Not | No
(If other than No provide advice to tenant)

8. Are any of the residents, visitors etc vulnerable to infection, e.g. older people, those already ill?

Yes | Possibly | Not Known | Probably Not | No
(If other than No provide advice to tenant)

Signed: _____

Date of assessment: _____