

Serial No:
1854991

To confirm the validity of this, registered Gas Engineer please contact Gas Safe on 0800 5500 or www.gassaferegister.co.uk

LANDLORD/HOMEOWNER GAS SAFETY RECORD

This form allows for the recording of results of checks as defined by the Gas Safety (Installation and Use) Regulations. Information recorded on this form does not confirm that the installation was installed by a Gas Safe registered business or that the installation complies with relevant Building Regulations. Chimney/flue/outlets were visually checked for adequate evacuation of combustion products. A detailed internal inspection has not been undertaken.



DETAILS OF REGISTERED BUSINESS				JOB ADDRESS		LANDLORD/AGENT ADDRESS		
Frank-K				Name:	AC21	Name:	Saxon	Nightland
Gas Safe Reg. No: 527466				Address:	Ady Church	Address:		
21 Millbank Road,					St Benedicks Alley			
Munlochy, IV8 8NL					Leit Augustin			
Tel. No: 07766 604 556				Tel. No:		Tel. No:		
Is Accommodation Rented? (Y/N)						No. Of Appliances Tested:	2	1
Emergency Control Accessible (Y/N)						Satisfactory Gas Tightness Test (Y/N)		
Satisfactory Visual Condition (Y/N)						Equipment Potential Bonding Satisfactory (Y/N)		
Appliance Details								
Appliance Location	Appliance Make	Appliance Model	Appliance Type	Type of Flue (OF/RS/FL)	Landlords Appliance (Y/N)	Appliance Inspected (Y/N)		
1 Back cupboard	Weka	Unic 36MR	Boiler	As	Yes	Yes		
2								
3								
4								
5								
Inspection Details								
Operating Pressure in mbar and or Heat Input in kW/Btu/h	Are Safety Devices Working? (Y/N)	Satisfactory Ventilation? (Y/N)	Flue Visual Condition (Pass/Fail/NA)	Flue Performance Checks (Pass/Fail/NA)	Combustion Analyser Reading		Appliance Serviced (Y/N)	Appliance Safe To Use (Y/N)
					CO: CO2 Ratio	CO PPM		
1 36-60kW	Yes	Yes	Pass	Pass	0.0010	108	Yes	Yes
2								
3								
4								
5								
CO Alarm								
					Approved CO Alarm Fitted? (Y/N)	Does The CO Alarm Work? (Y/N)		
					Yes	Yes		
Defect(s) Identified					Work Carried Out			
1					Gas Boiler Service			
2					Gas Safety Check			
3								
4								
5								
Warning Advice Issued? (Y/N)					Details Of Work Required			
1								
2								
3								
4								
5								
Received By:					ID Card No: 5792262			
Print Name:					Date: 16/9/15			
Signature:					Signature: [Signature]			
The Next Gas Safety Check Must Be Completed By:					16/9/26			