LANDLO GAS SA

GAS INSTAI	GAS INSTALLER: (Trading Title)	CBERTON	
Name:	C. Robertson	Gas Safe Register No:	799651
Address:	1923647 CACH Gas Installer Ref. No:	Gas Installer Ref. No :	SIG
	Muxerstar Lead Date of Issue:	Date of Issue:	22/29/01
Post code:	1030529	Time of Issue:	
Tel:	07710448500	Engineers Name: (print)	Coloninson

LANDLORD/HOME OWNER		GAS INSTALLER: (Trading Title)	Title) Cocin	Regelt 30x	300	
		Name: C, Ro	Sell Son	Gas Safe Register No:	iter No:	400
GAS SAFELY RECORD	Ad	Address: 1926	16High Che	Gas Installer Ref. No :	ef. No :	7)
This inspection is for gas safety purposes only in accordance with the current	ent	Popus	ite you	Date of Issue:	10/0	22/2
dition of the Gas Safety (Installation and Use) Regulations. Flues were inspected services and chacked for satisfactory evacuation of products of combustion. A detailed		Post code: \SC	, 82S	Time of Issue:	\	
nternal inspection of the flue integrity, construction and lining has not been carried out.	n carried out. Tel:	077	1048500	Engineers Name: (print)	0	Constition
TENANT/HOME OWNER DET	ETAILS		LANDLOF	ANDLORD/AGENT DETAILS	ILS (if applicable)	
Tenant/Home Owner* Name:		Landlord/	l/Agent* Name:	and the	her	3-1
Property Address: AMA Michael I-Co	The state of the s	Address:	S816165	YOUR STANKE		
But found force	Yalk			XX	À	
Post Code Tel:	,	Post Cod	de	Tel:	3/16/1	
Tenant/Home Owner* present during inspection	YES/NO	Landlord/	//Agent* present during inspection	spection	YESMO	C
APPLIANCE DETAILS	INSPECTION	ECTION DETAILS	FLUE	TEST	51	RESULTS
LOCATION MAKE MODEL TYPE Flue Type e.g. CF or RS	Operating Heat Input Device Pressure Kw Correct Mbar Operation Yes/No	Ventilation CO Alarm CO Alarm Adequate fitted tested Yes/No Yes/No Pass/Fail	Flue Flow Spillage Test Test Pass/Fail Pass/Fail	y Condition Pass/Fail	Combustion Appliance Performance Reading Safe To Use CO: 20 Yes/No CO2 Ratio / CO2 CO	Landlord's Inspected Appliance Yes/No
Kiches Tage LOCK SYSTEM R.S.	55 / Xes.	SIN XES SING	1/2/2/18/X	STAN STAN	SUN SUN	YOU YOU
trans Ofte Same tos Fil	19 / W/18	No Volume	all all al	M TORKS &	S-S-X	XXXXX
3	gradient (colored to the		6		\	and the second s
4						
o o						
DETAILS OF ANY FAULTS	REMEDIAL	ACTION TAKEN	DETAILS	OF WORK	CARRIED OUT	NOTICE ISSUED
1						Yes
2 Hos munce Bullakit	CHARISTA	100 NOS	2 / 3/2	158 xxx	7	
3						
4						
5						
Outcome of gas installation pipework visual inspection?	(Pass / Fail / NA	This Safety Record is is	is issued by Gas Installer: (SIGNED)	GNED)		ATTENTION
Outcome of gas supply pipework visual inspection?	(Pass / Fail / NA	Received on behalf of La	andlord / Home Owner: (SIGNED)	(SIGNED)		check due by:
Is the Emergency Control Valve access satisfactory?	Pass / Fail / NA	Tenant/Landlord/Agent/Home Owner	Home Owner*			42 BAO
Outcome of gas tightness test?	Pass / Fail NA	Number of appliances	tested: Fa	Ó		
Is the Protective Equipotential bonding satisfactory?	Bass / Fail / NA	Date: 10/08	22/3			

thickes!

To re-order quote code 663010-NUM

Copies: White - Landlord/Agent/Home Owner

Green - Registered Gas Installer

Pink - Tenant

1940758

* delete as applicable