## Regim

## LANDLORD/HOME OWNER GAS SAFETY RECORD

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This inspection is for gas safety purposes only to comply with the Gas Safety (Installation and Use) Regulations. Flues have been inspected visually and checked for satisfactory evacuation of products of combustion. A detailed internal inspection of the flue integrity, construction and lining has NOT been carried out.

	Audible CO Alarms:	O	4	သ	N	-		Gas Instal Pipework:	5	4	ω N	1 6			<u>a</u>	Postcode:		Address:	Compar	Reg No:	REGIST
	OTHER COMMENTS OR OBSERVATIONS						GIVE	lation			May TELLIER	FAST FLOW DUST 1010L	Location	はは、大学のなどのでは、	CR1277 C810	¥03) II	TOCKTON LV.	S Explicit (	Company: Res Barrier Home	589033	REGISTERED BUSINESS DETAILS
	OR OBSERVATIONS	\	\			\	GIVE DETAILS OF ANY FAULTS	For appliances not owned by the landlord the recorded 'Appliance Safe to Use' response is based on a visual check for obvious defects only satisfactory Visual  Satisfactory Gas Tightness Test:  Yes No Services Safe to Use' response is based on a visual check for obvious defects only satisfactory.	A beingsegis ans		WIEN	VOGUL 532	Make and Model	APPLIANCE DETAILS	C	2		Aga.	Marion Harrison		
	Are CO Alarms						ULTS	Emen Acces	7		land	System	Туре	S	L	7			Ado	Nar	INS
0 0	Are CO Alarms in Date:						100 1160	rd the recorded  Emergency Control Accessible:	W. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		20	23	Flue Type OF/RS/FL		Posicode:			Hum	Address:	Name & Title: -	PECTION
SAFETY CHECK DUE BEFORE:	Yes	This is						ntrol Y	ALK.		Some	3	Operating pressure in mbar or heat input kW/h or Btu/h					loop	19 SI	1	INSPECTION/INSTALLATION ADDRESS
DUE RE: 123	No GAS					_		Yes Yes			NES S	Syk	Safety device(s) correct operation Yes/No/NA					York-	DIE NO DE		ATION A
Print Na Licence Receive Signed:	NA 	MION	500					No	Daple		8	3	Spillage test Pass/Fail/NA		lei:				57	1	DDRESS
Print Name: Licence No: Licence No: Received By: Signed:	Testin Alarm	100	-0810				REC	Sat Tigl	100		NO	N	Smoke pellet flue flow test Pass/Fail/NA	FLUE						5	の
589	Testing of CO Alarms Satisfactory:		97				TIFICA	Satisfactory Gas Tightness Test:	M118		20	668pp	Initial combustion analyser reading	E TESTS							
5 89033	*		/				CTIFICATION WORK CARRIED OUT	ased on has Yest:	1		ND	Co 68 ppm	Final combustion analyser reading								
	Smoke Alarms I	Chestatics	TO 658				ORK CA	Yes Y	D Blue		20	SIL	Satisfactory termination Yes/No/NA		Numb	Postcode:	0	ませ	Address:	Name 8	LANDL
Signed: Issue Da RECEIVED BY (Delete as an Tenant/Ag Print Nam	BY (GA		Sec.			)	RRIED	No	TIM 5		20	Sass	Flue visual condition Pass/Fail/NA		Number of appliances tested:	de:	Pockcinictor	Grass		Name & Title: work	LANDLORD (OR AGENT) NAME & ADDRESS (if applicable)
Signed:  Issue Date:  VED BY  (Delete as applicable)  Tenant/Agent/Landlord/Home Owner  Print Name:	SENG		7		18.6		TUO	or obvio			X28	YES	Adequate ventilation Yes/No	INSP	iances te		5	2	KINGRISHUR	THE DO	AGENT)
te:	Smoke Alarms Fitted:							bvious defects only Equipotential Bonding Satisfactory:	TOTAL STATE		XE8	Sax	Landlord's appliance Yes/No/NA	INSPECTION DETAILS	sted:					Janes R	NAME 8
d/Home 0	=itted:	X	7		8	_	Z	ects on	23.3		×33	Y63	Inspected Yes/No	N DET		Tel:			buse	RESTRO	& ADDRI
N	Yes /	1997	1		OID B		WARNING * NOTICE ISSUED Yes/No/NA	Yes	J. D.		YES	3	Appliance A Visual S Check Yes/No	AILS	2					Prope	ESS (if ap
No one present at time of visit	No.				3			1			XX	X83	Appliance serviced SYes/No							PROPERTIES-	plicable)
asent Sister	N/A				\	\	WARNING TAG or LABEL FIXED Yes/No/NA	8 )			Sak	54X	Appliance Safe to Use Yes/No								

Copies:

White - Landlord/Agent/Home Owner

Green - Engineer

Pink - Tenant (if rented)

BF452210

★ IF YES, PLEASE REFER TO SEPARATE WARNING NOTICE - DANGER DO NOT USE REPORT PAD

Form Ref. REGP45