

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.

**REGISTERED BUSINESS DETAILS**

Reg No: 089033  
 Company: Bob Barrow Ruwens + Partners.  
 Address: 8 Wyndham Court  
York.  
 Postcode: YO31 1HY  
 Tel: 0185 2227215

**INSPECTION/INSTALLATION ADDRESS**

Name & Title: -  
 Address: 19 Great St.  
House Road  
York.  
 Postcode: -  
 Tel: -

**LANDLORD (OR AGENT) NAME & ADDRESS (if applicable)**

Name & Title: Mark Harries Ruwens Properties  
 Address: Kingsdale House  
The Grange  
Pocklington  
 Postcode: YO42 2XP Tel: -

Number of appliances tested: 2

**APPLIANCE DETAILS**

Location	Make and Model	Type	Flue Type OF/RS/FL	Operating pressure in mbar or heat input kWh or Btu/h	Safety device(s) correct operation Yes/No/NA	Spillage test Pass/Fail/NA	Smoke pellet flue flow test Pass/Fail/NA	Initial combustion analyser reading	Final combustion analyser reading	Satisfactory termination condition Yes/No/NA	Flue visual condition Pass/Fail/NA	Adequate ventilation Yes/No	Landlord's appliance Yes/No/NA	Inspected Visual Check Yes/No	Appliance serviced Yes/No	Appliance Safe to Use Yes/No
1 <u>KITCHEN</u>	<u>LONG LOGIC MAX C30</u>	<u>Bornier Ps</u>	<u>30kw</u>	<u>YES</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>Coll 13mm</u>	<u>Coll 13mm</u>	<u>YES</u>	<u>PASS</u>	<u>YES</u>	<u>YES</u>	<u>YES</u>	<u>YES</u>	<u>YES</u>
2 <u>HALLWAY</u>	<u>GAS</u>	<u>HGR FL</u>	<u>19.5kw</u>	<u>YES</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>YES</u>	<u>YES</u>	<u>YES</u>	<u>YES</u>	<u>YES</u>
3																
4																
5																

For appliances not owned by the landlord the recorded 'Appliance Safe to Use' response is based on a visual check for obvious defects only

Gas Installation Satisfactory Visual Inspection: Yes ☒ No ☐ Emergency Control Accessible: Yes ☒ No ☐ Satisfactory Gas Tightness Test: Yes ☒ No ☐ Equipment Potential Bonding Satisfactory: Yes ☒ No ☐

**GIVE DETAILS OF ANY FAULTS**

1																
2																
3																
4																
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**RECTIFICATION WORK CARRIED OUT**

WARNING NOTICE ISSUED Yes/No/NA \* WARNING TAG or LABEL FIXED Yes/No/NA

Approved Audible CO Alarms Fitted & Located Correctly\*: Yes ☒ No ☐ N/A ☐ Are CO Alarms in Date: Yes ☒ No ☐ N/A ☐ Testing of CO Alarms Satisfactory: Yes ☒ No ☐ N/A ☐ Smoke/Heat Alarms Located & Fitted correctly\*: Yes ☒ No ☐ N/A ☐

**OTHER COMMENTS OR OBSERVATIONS**

**NEXT GAS SAFETY CHECK DUE BEFORE:**

01/12/24

**ISSUED BY (GAS ENGINEER)**

Print Name: R. Barrow Signed: [Signature]  
 Licence No: 589033 Issue Date: 01/12/23

**RECEIVED BY**

Received By: [Signature] Tenant/Agent/Landlord/Home Owner  
 Signed: [Signature] Print Name: [Signature]

No one present at time of visit ☒