



# LANDLORD/HOME OWNER GAS SAFETY RECORD

Report Ref No: 45C 2669470

Form Ref. REGP45

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: 589033  
 Company: Rob Barrow Plumbing + Heating  
 Address: 8 Redcoat Lane York  
 Postcode: YO21 1HY  
 Tel: 0785 2227215

### INSPECTION/INSTALLATION ADDRESS

Name & Title: -  
 Address: 91 NEWLAND PARK DRIVE, HULL CO. YORK.  
 Postcode: YO10 3HR. Tel: -

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

Name & Title: Mark Harris Rentio Properties  
 Address: Kingsmead House The Grove Pocklington East Yorkshire.  
 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 Yes/No/NA	Flue visual condition Pass/Fail/NA	Adequate ventilation Yes/No	Landlord's appliance inspected Yes/No	Appliance Visual Check Yes/No	Appliance serviced Yes/No	Appliance Safe to Use Yes/No
1 Kitchen	CDA 6 Flus	Hob	FL	19.5mb	YES	NA	NA	NA	NA	NO	NO	YES	YES	YES	YES	YES
2 Pipe Stove	Idral Logic Max 330	Cover	RS	30KW	YES	NA	NA	Other	Other	YES	PASS	YES	YES	YES	YES	YES
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: Yes  No  Emergency Control: Yes  No  Satisfactory Gas Tightness Test: Yes  No  Equipotential Bonding Satisfactory: Yes  No

### GIVE DETAILS OF ANY FAULTS

1																
2																
3																
4																
5																

### RECTIFICATION WORK CARRIED OUT

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

**WARNING** \* NOTICE ISSUED Yes/No/NA

**WARNING TAG** or LABEL FIXED Yes/No/NA

**OTHER COMMENTS OR OBSERVATIONS**

**APPLIANCE** 1 2 3 4 5

**ISSUED BY (GAS ENGINEER)**

Print Name: P. Barrow Licence No: 589033

Signed: [Signature] Issue Date: 02/12/23

**RECEIVED BY**

(Delete as applicable)  
 Tenant/Agent/Landlord/Home Owner

Received By: [Signature] Signed: [Signature]

Print Name: [Signature]

No one present at time of visit

**SAFETY CHECK DUE BEFORE:**

02/12/24