

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 Barker Plumbing & Heating**
 Address: **8 Pinfelt Lane**
York
 Postcode: **YO31 1HY**
 Tel: **0185 222215**

INSPECTION/INSTALLATION ADDRESS

Name & Title: **-**
 Address: **44A MURKIN ST.**
YORK
 Postcode: **YO10 5AW** Tel: **-**

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

Name & Title: **MARIE HOLLIS RENTED PROPERTIES**
 Address: **Knightsbridge House**
The Grange
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 check Yes/No/NA	Inspected Visual Check Yes/No	Appliance serviced Yes/No	Appliance Safe to Use Yes/No
1 KITCHEN	LOWE LOC MAX 524	BONE RS	24HJ	YES	NO	NO	NO	6.30W	6.30W	YES	YES	YES	YES	YES	YES	YES
2 KITCHEN	LOWE LOC MAX 524	BONE RS	19.5HJ	YES	NO	NO	NO	NA	NA	NO	NO	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 Inspection: Yes ☒ No ☐ Emergency Control Accessible: Yes ☒ No ☐ Satisfactory Gas Tightness Test: Yes ☒ No ☐ Equipment Bonding Satisfactory: Yes ☒ No ☐

GIVE DETAILS OF ANY FAULTS

1																
2																
3																
4																
5																

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:

02/12/24

ISSUED BY (GAS ENGINEER)

Print Name: **R. Barker** Signed: **[Signature]**
 Licence No: **589033** Issue Date: **02/12/23**

RECEIVED BY

Received By: **[Signature]** Print Name: **[Signature]**
 Tenant/Agent/Landlord/Home Owner at time of visit ☒