ort Ref No: 45C 326

Rep

This inspection S. for evacuation of purposes products of combustion. A detailed internal inspection of the flue integrity, construction and lining only to comply with the Gas Safety (Installation and Use) Regulations. Flues have been inspected visually and

	3	Approved Audible CO Alarms Fitted & Located Correctly**: Yes V No N/A Alarms OTHER COMMENTS OR OBSERVATIONS	3 2	73	Gas Installation Satisfactory Visual Yes No No Pipework: GIVE DETAILS OF ANY F	For appliances not owned by the la	4	2 KICHES SMEG CHRONE 28	Location Make and Model	APPLIANCE DETA	Tel: 07799474565	Postcode: You Sign	Address. Crease York York	pany: SUEPR	REGISTERED BUSINESS DELMILS Reg No: 20.5963	BILICIALEGO
18 112 124 Received By: Hymids	CHECK DUE CHECK DUE Licence No: 22.943	NEXT GAS Its in Date: Yes No No N/A Alarms Satisfactory: Yes No No	7		Gas est:	ndlord the recorded 'Appliance Safe to Use' response is based on		200 42 42 42 19:80 74 2000	Type OF/RS/FL Neat input kW/h or Btu/h Yes/No/NA Operating Safety Spillage Smoke Initial Final Final Smoke OF/RS/FL Neat input operation Pass/Fail/NA Pass/Fail/NA reading reading	LS FLUE TESTS	Postcode: YOSI JUE Tel:		4004	Address: 45 CLOON ST	Name & Title: THE CO YALL	INCTAL ATION
(Delete as applicable) Tenant/Agent/Landlord/Home Owner at time of visit Print Name:	Signed:	Smoke/Heat Alarms Located & Fitted correctly**: Yes No N/A ISSUED BY (GAS ENGINEER)	3	Yes/No/NA Yes/No/NA	Equipotential Bonding Satisfact	a visual check for obvious defects only		1 12 02 12 12 12 12 12 12 12 12 12 12 12 12 12	Satisfactory Flue visual Adequate Landlord's termination condition ventilation appliance Yes/No/NA Pass/Fail/NA Yes/No Yes/No/NA Yes/No Yes/No	INSPECTION DETAILS	Number of appliances tested:			Address: LZARO HOUSE FARM	Name & Title: M.R. R. PARCH Name & Title: M.R. R. PARCH	

Copies:

White

Landlord/Agent/Home Owner

Green

Engineer

Pink - Tenant (if rented)

BF452310

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

Form Ref.

REGP45