

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: 624529
 Company: JO PLUMBING
 Address: 2 RUNDLE COURT
ROCKINGTON
 Postcode: TO42 2LJ
 Tel: 02917413898

INSPECTION/INSTALLATION ADDRESS

Name & Title: K BLADES
 Address: 1 NEWLANDS PARK
TORK.
 Postcode: TO10 3HW .Tel:
 Rented: Yes: No:

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

Name & Title:
 Address:
 Postcode: Tel:

DESCRIPTION OF WORK CARRIED OUT

	APPLIANCE DETAILS					FLUE TESTS				INSPECTION DETAILS								
	Location	Make and Model	Type	Flue Type OF/RS/FL	Operating pressure in mbar or heat input kW/h 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 Yes/No/NA	Inspected Yes/No	Appliance Visual Check Yes/No	Appliance serviced Yes/No	Appliance Safe to Use Yes/No
1	KITCHEN	WORCESTER 24i	FF	24kW	TEL	NA	NA	0.014	0.014	TEL	FAIL	TEL	TEL	TEL	TEL	TEL	NO	TEL
2																		
3	KITCHEN	COA-G TRINE CAS	WBS	PIPER	TEL	NA	NA			TEL	FAIL	TEL	TEL	TEL	TEL	TEL	NO	TEL
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 Pipework: Satisfactory Visual Inspection: Yes No Emergency Control Accessible: Yes No Satisfactory Gas Tightness Test: Yes No Equipotential Bonding Satisfactory: Yes No

	GIVE DETAILS OF ANY FAULTS	RECTIFICATION WORK CARRIED OUT	WARNING NOTICE ISSUED Yes/No/NA	* WARNING TAG or LABEL FIXED Yes/No/NA
	1	<i>(Diagonal line through box)</i>	<i>(Diagonal line through box)</i>	
2				
3				
4				
5				

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

Number of appliances tested: 1/NO **NEXT GAS SAFETY CHECK DUE BEFORE:** 6 1 1 1 25

ISSUED BY (GAS ENGINEER)

Print Name: JOHN PITHA Signed: [Signature]
 Licence No: 5581591 Issue Date: 6 JAN 24

RECEIVED BY

Received By: [Signature] (Delete as applicable) Tenant/Agent/Landlord/Home Owner No one present at time of visit
 Signed: [Signature] Print Name: _____