

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	INSPECTION/INSTALLATION ADDRESS	LANDLORD (OR AGENT) NAME & ADDRESS (if applicable)
Reg No: 624529	Name & Title: MR BLADES	Name & Title:
Company: JD PLUMBING	Address: 82 THIEF LANE	Address:
Address: 7 DUNDIE COURT	TORK.	
Postcode: YO42 2LJ	Postcode: YO10 3HS Tel:	
Tel: 07917413898	Rented: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	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	IDEAL LOGIC H24	24KW	Tel	NA	NA	NA	NA	NA	NA	Tel	NA	Tel	Tel	Tel	Tel	No	Tel
2																		
3	KITCHEN	CDA GRNK CAS	103.19 MAR	NA	NA	NA	NA	NA	NA	NA	Tel	NA	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									
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: **two** **NEXT GAS SAFETY CHECK DUE BEFORE: 6 / 1 / 25**

ISSUED BY (GAS ENGINEER)	RECEIVED BY
Print Name: JOHN DUFFY Signed: [Signature]	Received By: [Signature] (Delete as applicable) Tenant/Agent/Landlord/Home Owner No one present at time of visit <input type="checkbox"/>
Licence No: 5581591 Issue Date: 6 JAN 24	Signed: [Signature] Print Name: