

# LANDLORD/HOME OWNER GAS SAFETY RECORD

This inspection is for gas safety purposes only in accordance with the current edition of the Gas Safety (Installation and Use) Regulations. Flues were 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.

GAS INSTALLER: (Trading Title) Cain Robertson

Name: C. Robertson Gas Safe Register No: 157664

Address: 19. Leighton Court Gas Installer Ref. No: 178

Post code: RA12 1TE York Date of Issue: 18/2/24

Tel: 1030 529 Time of Issue: C. Robertson

0771048500 Engineers Name: (print)

## TENANT/HOME OWNER DETAILS

Tenant/Home Owner\* Name: \_\_\_\_\_

Property Address: 18. WILLS STREET

York

Post Code \_\_\_\_\_

Tel: \_\_\_\_\_

Tenant/Home Owner\* present during inspection YES/NO \_\_\_\_\_

## LANDLORD/AGENT DETAILS (if applicable)

Landlord/Agent\* Name: Adam Bennett Limited

Address: 58. GUYBATE

York

Post Code \_\_\_\_\_

Tel: 611611

Landlord/Agent\* present during inspection YES/NO (NO)

APPLIANCE DETAILS			INSPECTION DETAILS				FLUE TEST			RESULTS									
LOCATION	MAKE	MODEL	TYPE	Flue Type e.g. CF or RS	Operating Pressure Mbar	Heat Input Kw	Safety Device Correct Operation Yes/No	Ventilation Adequate Yes/No	CO Alarm fitted Yes/No	CO Alarm tested Pass/Fail	Flue Flow Test Pass/Fail	Spillage Test Pass/Fail	Termination Satisfactory Yes/No	Visual Condition Pass/Fail	Combustion Performance Reading CO: CO2 Ratio / CO2 CO	Appliance Safe To Use Yes/No	Landlord's Appliance Yes/No	Inspected Yes/No	
1	Wicks	Wicks	HE	FS	18.1	1	Yes	Yes	Yes	Pass	Pass	Pass	Yes	Pass	9.9901	Yes	Yes	Yes	
2	Wicks	Wicks	HE	FS	18.1	1	Yes	Yes	Yes	Pass	Pass	Pass	Yes	Pass	9.1500	Yes	Yes	Yes	
3																			
4																			
5																			

DETAILS OF ANY FAULTS		REMEDIAL ACTION TAKEN		DETAILS OF WORK CARRIED OUT		LABEL & WARNING NOTICE ISSUED	
1	Gas pipe not secured	Secured	At Risk			Yes	NO
2	No flue bracket	Bracket	At Risk				
3							
4							
5							

Outcome of gas installation pipework visual inspection? Pass / Fail / NA

Outcome of gas supply pipework visual inspection? Pass / Fail / NA

Is the Emergency Control Valve access satisfactory? Pass / Fail / NA

Outcome of gas tightness test? Pass / Fail / NA

Is the Protective Equipotential bonding satisfactory? Pass / Fail / NA

This Safety Record is issued by Gas Installer: (SIGNED) \_\_\_\_\_

Received on behalf of Landlord / Home Owner: (SIGNED) \_\_\_\_\_

Tenant/Landlord/Agent/Home Owner\* \_\_\_\_\_

Number of appliances tested: 2

Date: 18/2/24

ATTENTION  
Next safety check due by: 18/12/25