

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.

TENANT/HOME OWNER DETAILS

Tenant/Home Owner* Name: _____
 Property Address: 76. LEON STREET
 Post Code: _____
 Tenant/Home Owner* present during inspection: _____

LANDLORD/AGENT DETAILS (if applicable)

Landlord/Agent* Name: ADAM BENNETT LITTLING
 Address: 58. GILLYWARRIE YORK
 Post Code: _____
 Landlord/Agent* present during inspection: YES(ND)

GAS INSTALLER: (Trading Title) COWN. ROBERTSON
 Name: C. ROBERTSON Gas Safe Register No: LS70664
 Address: 19 LILGATION CROFT Gas Installer Ref. No: AS
 Post code: RA5 1LJ Date of Issue: 9/14/24
 Tel: 07710448500 Engineers Name: (print) C. ROBERTSON

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	Ventilation Adequate	CO Alarm fitted	CO Alarm tested	Flue Flow Test	Spillage Test Pass/Fail	Termination Satisfactory	Visual Condition	Combustion Performance	Appliance Safe To Use	Landlord's Appliance	Inspected Yes/No	
1	KAYEN	30001	HE	RS	19	19	YES	YES	YES	PASS	PASS	PASS	CO2 29	PASS	YES	YES	YES	YES	
2	KAYEN	30001	HE	RS	19	19	YES	YES	YES	PASS	PASS	PASS	CO2 29	PASS	YES	YES	YES	YES	
3																			
4																			
5																			

DETAILS OF ANY FAULTS		REMEDIAL ACTION TAKEN		DETAILS OF WORK CARRIED OUT		LABEL & WARNING NOTICE ISSUED	
1	2	3	4	5	Yes	No	Yes

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? 1.5mb ca 2mb
 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: 9/14/24

ATTENTION
 Next safety check due by: 18/11/25