

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: 157664  
 Company: COLIN ROBERTSON  
 Address: 19 LEICHTON CROFT, RAWSCUFFE, YORK  
 Postcode: YO30 5ZG  
 Tel: 07710448500

### INSPECTION/INSTALLATION ADDRESS

Name & Title: ZARA HILL READ  
 Address: YORK  
 Postcode: YORK  
 Tel: YORK

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

Name & Title: ADAM BIRNIE  
 Address: YORK  
 Postcode: YORK  
 Tel: 611611  
 Number of appliances tested: TWO

### APPLIANCE 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 flow test Pass/Fail/NA	Initial combustion analyser reading	Final combustion analyser reading
1 KITCHEN	JOULE IMINI CR 9MB	HEC	RS	19.5	YES	N/A	N/A	0.00	0.00
2 KITCHEN	NEWWOOD L/E	CR	FL	19	N/A	N/A	N/A	N/A	N/A
3									
4									
5									

### FLUE TESTS

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
YES	PASS	N/A	YES	YES	YES	YES	YES
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

### INSPECTION DETAILS

Satisfactory Gas Tightness Test: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Emergency Control Accessible: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Are CO Alarms in Date: Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Approved Audible CO Alarms Fitted & Located Correctly**: Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Smoke/Heat Alarms Located & Fitted correctly**: Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Testing of CO Alarms Satisfactory: Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Print Name: C. Robertson	Licence No: 157004	Issue Date: 5/6/24
YES	YES	N/A	N/A	N/A	N/A			

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   
 Are CO Alarms in Date: Yes  No  N/A   
 Approved Audible CO Alarms Fitted & Located Correctly\*\*: Yes  No  N/A   
 Smoke/Heat Alarms Located & Fitted correctly\*\*: Yes  No  N/A   
 Testing of CO Alarms Satisfactory: Yes  No  N/A   
 Satisfactory Gas Tightness Test: Yes  No   
 Equipment Bonding Satisfactory: Yes  No   
 WARNING NOTICE ISSUED Yes/No/NA: NO  
 WARNING TAG or LABEL FIXED Yes/No/NA: NO

### GIVE DETAILS OF ANY FAULTS

1 COOKER SHOWING SIGNS OF AGE NO SAFETY DEVICES  
 2 ADVISE TO CHANGE COOKER NOW WITH SAFETY DEVICES

### RECTIFICATION WORK CARRIED OUT

1

### OTHER COMMENTS OR OBSERVATIONS

NEXT GAS SAFETY CHECK DUE BEFORE:  
 816 RS

### ISSUED BY (GAS ENGINEER)

Print Name: C. Robertson  
 Licence No: 157004  
 Signed: [Signature]  
 Issue Date: 5/6/24

### RECEIVED BY

Received By: \_\_\_\_\_  
 Signed: \_\_\_\_\_  
 Tenant/Agent/Landlord/Home Owner  
 No one present at time of visit