

# 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: 13 MACKHAM STREET  
 Post Code: \_\_\_\_\_  
 Tel: \_\_\_\_\_  
 YES/NO

## LANDLORD/AGENT DETAILS (if applicable)

Landlord/Agent\* Name: ADAM BENNETT LETTINGS  
 Address: 58 GULLYHURST YORK  
 Post Code: \_\_\_\_\_  
 Tel: 011611  
 YES/NO

GAS INSTALLER: (Trading Title) COLIN ROBERTSON  
 Name: G. ROBERTSON Gas Safe Register No: 157884  
 Address: 19 LEIGHTON ROAD Gas Installer Ref. No: A.B.  
 Post code: RA2 6LFF Date of Issue: 11/6/24  
 Tel: 030529 Time of Issue: \_\_\_\_\_  
0771048500 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 (if fitted)	Flue Flow Test	Spillage Test	Termination Satisfactory	Visual Condition	Combustion Performance Reading CO: / CO2 CO	Appliance Safe To Use	Landlord's Appliance	Inspected Yes/No
1	KITCHEN	GREEN	HE	RS	19	19	YES	YES	YES	YES	YES	YES	YES	YES	0.0006	YES	YES	YES
2	KITCHEN	STAN	COMBI	RS	19	19	YES	YES	YES	YES	YES	YES	YES	YES	7.8774	YES	YES	YES
3	KITCHEN	CITR	BOILER/HOB	FL	19	19	YES	YES	YES	YES	YES	YES	YES	YES	7.8774	YES	YES	YES
4																		
5																		

REMEDIAL ACTION TAKEN		DETAILS OF WORK CARRIED OUT		LABEL & WARNING NOTICE ISSUED	
1	Facility CO Alarm replaced	CO Alarm fitted	CO Alarm tested	YES	NO
2				YES	NO
3	Fitted new CO Alarm	CO Alarm fitted	CO Alarm tested	YES	NO
4				YES	NO
5				YES	NO

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: Two  
 Date: 22/6/25 NEXT GAS SAFETY CHECK DUE WITHIN 12 MONTHS