

# LANDLORD / HOME OWNER GAS SAFETY RECORD

SERIAL N°

CP12 817786

This form allows the recording of the results of the required checks as defined by the Gas Safety (Installation and Use) Regulations. Chimney systems were inspected visually and checked for satisfactory evacuation of products of combustion, a detailed internal inspection of the chimney system has not been carried out. The information recorded on this form does not confirm that the installation was installed by a person licensed by Gas Safe Register nor that the installation complies with any relevant Building Regulations. For appliances not owned by the Landlord, where only visual checks are undertaken, recording a 'YES' in 'Appliance Safe' is based only on a visual check for obvious defects with no physical tests completed.

## JOB ADDRESS

Rented Accommodation (Yes / No)

Name: SARA CANNELL  
 Address: 96 HULL ROAD  
YORK  
 Postcode: YO10 3LN  
 Tel No: \_\_\_\_\_

## LANDLORD DETAILS (or where appropriate their agent)

Name: SARA CANNELL  
 Address: 14 WAWWICKS BENCH RD  
GUILDFORD  
 Postcode: GU1 3TL  
 Tel No: \_\_\_\_\_

## REGISTERED BUSINESS DETAILS

Reg No: 153232  
 Company: K BRANNAN PLUMBING + HEAT  
 Address: 2 CYCLE STREET  
YORK  
 Postcode: YO10 3LJ  
 Tel No: 07939512774

## APPLIANCE DETAILS

No. of Appliances Listed Below:

Location	Appliance Type	Make	Model	Chimney/Flue Type (FL/OFRS)	Landlord's Appliance (Yes/No/NA)	Appliance Checked (Yes/No)
1 UTILITY ROOM	BOILER	VAillant, ECO-TEC	424	RS	YES	YES
2						
3						
4						

## INSPECTION / SAFETY CHECKS

Ventilation Satisfactory (Yes/No)	Operating Pressure or Heat Input (mbar/kW)	Safety Device(s) Correct Operation (Yes/No)	Visual Condition Satisfactory (Yes/No/NA)	Chimney/Flue Performance (Pass/Fail/NA)	COMBUSTION READING(S) Final (If Applicable)	Appliance Serviced (Yes/No)	Appliance Safe (Yes/No)
YES	26.14kw	YES	YES	PASS	0.0005	NO	YES
2							
3							
4							

## COMBUSTION READING(S)

Initial (If Applicable)	Final (If Applicable)
	0.0005

## SUMMARY

Appliance Serviced (Yes/No)	Appliance Safe (Yes/No)
NO	YES

## AUDIBLE CO DETECTOR

Correctly Installed (Yes/No/NA)	In Date (Yes/No/NA)	Test Satisfactory (Yes/No/NA)
YES	YES	YES

## APPLIANCE DEFECT(S) IDENTIFIED

1	
2	
3	
4	

## REMEDIAL ACTION TAKEN


## INSTALLATION GENERAL (Yes/No/NA)

Emergency Control Valve Satisfactory: <input checked="" type="checkbox"/>	Gas Installation Pipework Satisfactory (Visual): <input checked="" type="checkbox"/>
Meter / Cylinder Installation Satisfactory (Visual): <input checked="" type="checkbox"/>	Gas Installation Correct Materials Used (Visual): <input checked="" type="checkbox"/>
Main Protective Bonding Satisfactory (Visual): <input checked="" type="checkbox"/>	Gas Tightness Test Satisfactory: <input checked="" type="checkbox"/>

## DETAILS OF OTHER WORK CARRIED OUT (e.g. service, etc.)

## OBSERVATIONS / COMMENTS / REMEDIAL WORK REQUIRED

INLET PRESSURE 15.5mb ON PO1 TEST MODE.  
 .081m³ per 120sec x30 = 2-453 gas.

NEXT SAFETY CHECK DUE BEFORE 04/07/25

Issued by: Kevin Brannan Signed: K Brannan  
 Licence No: 5643171 Issue Date: 04/07/24  
 Received by: SARA CANNELL Signed: SJ  
 Print Name: SARA CANNELL (please state)  
 Tenant / Home Owner / Landlord / Other

WARNING NOTICE SERIAL N°917

\* Refer to separate Warning Notice(s)

Top Copy - Landlord / Managing Agent / Home Owner

Middle Copy - Registered Business

Bottom Copy - Tenant

To re-order quote Ref. CP12