

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: **205963**
 Company: **SEEDSAFE SERVICES**
 Address: **12 York Rd**
SMASSON YORK
 Postcode: **YO32 5JN**
 Tel: **0779947465**

INSPECTION/INSTALLATION ADDRESS

Name & Title: **THE OCCUPIER**
 Address: **6 SUSSEX RD**
YORK
 Postcode: **YO10 5HK**
 Tel:

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

Name & Title: **AND SMITH**
 Address: **19 THE AVENUE**
SMASSON YORK
 Postcode: **YO32 1ET**
 Tel:

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 peller flue flow test Pass/Fail/NA	Initial combustion analyser reading	Final combustion analyser reading	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
1 Kitchen	IDEAL BOILER COMBI 30	ORBS	RS	18.39	Yes	Pass	Pass	0.056	0.026	Yes	Pass	Yes	Yes	Yes	Yes	Yes	Yes
2 Kitchen	CANON OVERHEAT	COOKER FL	FL	9.07	Yes	Pass	Pass	NA	NA	NA	Pass	Yes	Yes	Yes	Yes	Yes	Yes
3																	
4																	
5																	

FLUE TESTS

INSPECTION DETAILS

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 N/A
 Emergency Control Accessible: Yes No N/A
 Satisfactory Gas Tightness Test: Yes No N/A
 Equipment Bonding Satisfactory: Yes No N/A

GIVE DETAILS OF ANY FAULTS

RECTIFICATION WORK CARRIED OUT

No	Location	Make and Model	Type	Flue Type	Operating pressure	Safety device	Spillage test	Smoke peller flue flow test	Initial combustion analyser reading	Final combustion analyser reading	Satisfactory termination	Flue visual condition	Adequate ventilation	Landlord's appliance	Inspected	Appliance Visual Check	Appliance serviced	Appliance Safe to Use	
1	NA																		
2	NA																		
3																			
4																			
5																			

Approved Audible CO Alarms Fitted & Located Correctly: Yes No N/A
 Are CO Alarms in Date: Yes No N/A
 Testing of CO Alarms Satisfactory: Yes No N/A
 Smoke/Heat Alarms Located & Fitted correctly: Yes No N/A

OTHER COMMENTS OR OBSERVATIONS

NEXT GAS SAFETY CHECK DUE BEFORE:

ISSUED BY (GAS ENGINEER)

RECEIVED BY

Print Name: **STEFEN MITCHELL** Signed: **[Signature]**
 Licence No: **205963** Issue Date: **12/10/2014**
 Received By: **[Signature]** Tenant/Agent/Landlord/Home Owner
 Signed: **[Signature]** Print Name: **[Name]**
 No one present at time of visit