



LANDLORD/HOME OWNER GAS SAFETY RECORD

Report Ref No: **45C 4145707**

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: _____

Company: Abbey Plumbing + Heating

Address: 41 Kirkdale Road
Osbaldwick, York

Postcode: YO10 3NQ

Tel: 07876 492221

INSPECTION/INSTALLATION ADDRESS

Name & Title: Vacant

Address: 197 Hull Road
York

Postcode: YO10 3JY Tel: _____

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

Name & Title: S. Dawson

Address: 305 Hull Road
York

Postcode: YO10 3LU Tel: _____

Number of appliances tested: 1

	APPLIANCE DETAILS						FLUE TESTS				INSPECTION 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 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
1	<u>Boiler Room</u>	<u>Vokera Unica 32</u>	<u>Boiler</u>	<u>RS</u>	<u>19.1</u>	<u>Yes</u>	<u>NA</u>	<u>NA</u>	<u>0001-0016</u>	<u>Yes</u>	<u>Pass</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
2																	
3																	
4																	
5																	

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

Satisfactory Gas Tightness Test: Yes No

Equipotential Bonding Satisfactory: Yes No

GIVE DETAILS OF ANY FAULTS

1	
2	
3	
4	
5	

RECTIFICATION WORK CARRIED OUT

	WARNING NOTICE ISSUED Yes/No/NA	WARNING TAG OF LABEL FIXED Yes/No/NA
1		
2		
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:

13/10/25

ISSUED BY (GAS ENGINEER)

Print Name: Joe Dawson Signed: _____

Licence No: 41304 Issue Date: 10/10/24

RECEIVED BY

Received By: No one present (Delete as applicable) Tenant/Agent/Landlord/Home Owner No one present at time of visit

Signed: _____ Print Name: _____