



LANDLORD/HOME OWNER GAS SAFETY RECORD

Report Ref No: 45C 3069805

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:	158205
Company:	RICHARD HORSMAN BRITISH GAS
Address:	NEW WORKLY LEEDS
Postcode:	LS24
Tel:	

INSPECTION/INSTALLATION ADDRESS	
Name & Title:	Oce
Address:	4 HESLINGTON MUSE YORK
Postcode:	YO10 5BT
Tel:	

LANDLORD (OR AGENT) NAME & ADDRESS (if applicable)	
Name & Title:	MRS P. PARTINGTON
Address:	8 STATION RD COPMANHURST
Postcode:	YO23 3SX
Tel:	

Number of appliances tested: TWO

	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	Appliance Safe to Use Yes/No
1	KITCHEN	IDEAL LOGIC 30+	COMB	R/S	29KW	YES	N/A	N/A	0.008	0.008	YES	PASS	YES	YES	YES	YES	YES	YES
2	KITCHEN	LAMONA HOB	HOB	P/L	8.4KW	YES	N/A	N/A	N/A	N/A	YES	N/A	YES	YES	YES	YES	YES	YES
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 ☐
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GIVE DETAILS OF ANY FAULTS		RECTIFICATION WORK CARRIED OUT		WARNING NOTICE ISSUED Yes/No/NA	* WARNING TAG or 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 ☐
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OTHER COMMENTS OR OBSERVATIONS

NEXT GAS
SAFETY
CHECK DUE
BEFORE:

9 112 125

ISSUED BY (GAS ENGINEER)	
Print Name: R. HORSMAN	Signed: [Signature]
Licence No: 5520013	Issue Date: 9-12-2024
RECEIVED BY	
Received By: [Signature]	(Delete as applicable) Tenant/Agent/Landlord/Home Owner
Signed: [Signature]	No one present at time of visit ☐
	Print Name: JANE PARTINGTON

Copies: White - Landlord/Agent/Home Owner Green - Engineer Pink - Tenant (if rented)

BF452309

* IF YES, PLEASE REFER TO SEPARATE
WARNING NOTICE - DANGER DO NOT USE REPORT PAD

Form Ref. REGP45