

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: 589033

Company: Rob Barron Plumbing + Heating

Address: 8 Dyeloch Close
Stokeston Ln. York.

Postcode: YO31 1HY

Tel: 0785 222015

INSPECTION/INSTALLATION ADDRESS

Name & Title: -

Address: 188 Tang Hall Ln.
York.

Postcode: YO10 3PL Tel:

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

Name & Title: KEVIN BUDDS

Address: STONELEIGH
Saughin Lane Sutton On Derwent
York.

Postcode: YO41 4BX Tel: 07734855490

Number of appliances tested: 2

	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	BATHROOM CUB	Worcester 30 Si	COMBI	RS	30kw	YES	NA	NA	6147	6147	YES	PASS	YES	YES	YES	YES	YES	YES
2	KITCHEN	CDA	HOB	FL	19kw	YES	NA	NA	NA	NA	NO	NO	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

	GIVE DETAILS OF ANY FAULTS	RECTIFICATION WORK CARRIED OUT	WARNING NOTICE ISSUED	WARNING TAG or LABEL FIXED
			Yes/No/NA	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

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NEXT GAS SAFETY CHECK DUE BEFORE:

07/01/26

ISSUED BY (GAS ENGINEER)

Print Name: R. Barron Signed: [Signature]

Licence No: 589033 Issue Date: 07/01/25

RECEIVED BY

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

Received By: _____ Signed: _____ Print Name: _____