## LANDLORD/HOME OWNER GAS SAFETY RECORD

Report Ref No: 45C 4383802

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.

REGI	STERED BUSINESS D	INS	INSPECTION/INSTALLATION ADDRESS								LANDLORD (OR AGENT) NAME & ADDRESS (if applicable)										
Reg No: 589033				Name & Title:								Name & Title: KEVIN BLADES									
Company: RoB Barrow Permand + HATING.				Address: 28 This (N								Address: STONELE 16H									
Address: & Ryk (ROLT CLOSE				York - addition against								SANDHILL LANE, SUTTON ON DERWENT									
STOCKEN LU. YORK.													YORK								
Postcode: Yo31 IFIY.												Postcode: Y04-1 46X Tel: 07734855490.									
Tel: 0785 222215				Postcode: YOR 3HS Tel:								Number of appliances tested:									
		APPLIANCE DETA	ILS					FLUE	TESTS				INS	PECTIO	ON DE	TAILS					
	Location	Make and Model	Туре	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	KUCLEN.	Wordster 24 12i	BOILR	Rs.	ZFKW	yks	NA	NA	6124	C012A.	YES	PASS	YES	YES	YES	YES	YES	YES			
2															100	) II 1	aqu				
3										B B		for Head		1.15							
4		9 C1 C Short 1 (0)	econti	a diffin	of vite	7.6	MENULES.	don a	SHYV	CILL SITE	LO UNIO	M HUI					47.				
5	1.10	r appliances not owned by the la		10 15 10	HEBU B	W I V			H-SUIT	1 18 11 1	nnoan										
NOTICE ISSUED											ARNING TAG or LABEL FIXED										
GIVE DETAILS OF ANY FAU				TS RECTIFICATION V							ORK CARRIED OUT						Yes/No/NA Yes/No/NA				
1 2																					
3				- Contract																	
4					- Brighting over								Tilles	,							
	5						The state of the s														
The second	pproved Audible CO Alarms tted & Located Correctly**:	Yes No N/A Are Aları	CO ns in Date:	Yes	No1	N/A	Testing Alarms	of CO Satisfactor	y: Yes <u>L</u>	_ No_	N/A _	Sr Lo	moke/Hea	t Alarms Fitted corre	ectly**:	Yes	No_	N/A			
	OTHER CO	MMENTS OR OBSERVATIONS	S		VEXT (	GAS			TOTAL PARTY	19	SSUED	BY (GA	AS EN	GINEEF	R)	7		1814 1115			
		as a second seco			SAFE	TY	Print	Name: .	PB	LARURON			Signed:	76.5	RA	(0)	X				
		/			HECK			nce No:		38903			Issue D		1	06/0	1/23	X-			
	10.0		BEFORE:							RECEIVED BY											
											(Delete as applicable) No one present										
	/			06/01/26 Received By:							Tenant/Agent/Landlord/Home Owner at time of visit										