

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 3NG  
Tel: 07876492221

## INSPECTION/INSTALLATION ADDRESS

Name & Title: Vacant  
Address: 6 Daysfoot Court  
York  
Postcode:  
Tel:

## LANDLORD (OR AGENT) NAME &amp; ADDRESS (if applicable)

Name & Title: Dawson  
Address: 305 Hull Road  
York  
Postcode: YO10 3LU Tel:  
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	Outhouse	Vokera Compact A25 Biler	RS	19-8	Yes	NA	NA	NA	0.000	0.013	Yes	Pass	Yes	Yes	Yes	Yes	Yes	Yes
2	Kitchen	Stoves, 4 Burner	Hob	FL	20	Yes	NA	NA	—	—	Yes	Pass	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 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 ☐

## OTHER COMMENTS OR OBSERVATIONS

NEXT GAS  
SAFETY  
CHECK DUE  
BEFORE:

24/10/26

## ISSUED BY (GAS ENGINEER)

Print Name: J. Dawson Signed: [Signature]  
Licence No: 41304 Issue Date: 24/1/25

## RECEIVED BY

Received By: N/A (Delete as applicable) Tenant/Agent/Landlord/Home Owner No one present at time of visit ☒  
Signed: Print Name: