

Serial No
JB816100



Registered Business/engineer details can be checked at www.gassaferegister.co.uk or by calling 0800 408 5500.

DP COMPLETE PLUMBING LANDLORD/HOMEOWNER GAS SAFETY RECORD

This record can be used to document the outcomes of the checks and tests required by The Gas Safety (Installation and Use) Regulations.
Some of the outcomes are as a result of visual inspection only and are recorded where appropriate.
Unless specifically recorded no detailed inspection of the flue lining, construction or integrity has been performed.



Gas safe is a registered trade mark of HSE and is used under licence.

Details of Registered Business

Gas Safe Register No **915621**
Registered Engineer's Name **DANIEL PERRY**
Gas Safe Register Licence Number **5791173**
Business **DP COMPLETE PLUMBING**
Address **4 FAWKES DRIVE**
YORK, NORTH YORKSHIRE
Postcode **YO26 5QE**
Contact No **07886 137 704**

Details of Site

Name (Mr/Mrs/Miss/Ms)
Address **9 MAIN AVENUE**
YORK
Postcode **YO31 0RT**
Contact No

Details of Customer/Landlord (or agent where appropriate)

Name (Mr/Mrs/Miss/Ms) **SAFE STUDENTS LETS**
Address **123 EAST PARADE**
YORK
Postcode **YO31 7YD**
Contact No

Number of Appliances tested **2**

select as appropriate and relevant
Outcome of gas installation pipework visual inspection? **Pass** / Fail / NA
Outcome of gas supply pipework visual inspection? **Pass** / Fail / NA
Is the Emergency Control Valve access satisfactory? **Pass** / Fail
Outcome of gas tightness test? **Pass** / Fail / NA
Is the Protective Equipotential bonding satisfactory? **Pass** / Fail

Appliance Details

	Location of	Type	Manufacturer	Model	Owned by Landlord/Homeowner Yes/No	Inspected Yes/No	Type of flue
1	KITCHEN	COMBI	IDEAL	VOGUE 40MA	YES	YES	RS
2	KITCHEN	MOB	MAIMUR	VP-H306SS	YES	YES	FL
3							
4							

Inspection Details

	Operating pressure in mbar and/ or heat input kW/h or Btu/h	Operation of safety device(s) Pass/Fail/NA	Ventilation satisfactory Yes/No	Visual condition of flue and termination Pass/Fail/NA	Flue operation checks Pass/Fail/NA	Combustion analyser reading (if applicable) PPH 9.3	Appliance serviced Yes/No	SAFE TO USE Yes/No
1	38.06	PASS	YES	PASS	NA	20.07	YES	YES
2	10.38	PASS	YES	NA	NA	NA	NO	YES
3								
4								

Optional CO/Smoke Alarm Test Details

Requested to test				Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
CO Alarm		Smoke Alarm					
(if fitted) Location	Tested	(if fitted) Location	Tested				
KIT	Pass <input checked="" type="checkbox"/> Fail <input type="checkbox"/>						
	Pass <input type="checkbox"/> Fail <input type="checkbox"/>						
	Pass <input type="checkbox"/> Fail <input type="checkbox"/>						
	Pass <input type="checkbox"/> Fail <input type="checkbox"/>						

Safety Related Defect(s) Identified

	GIUSP classification eg. AR, ID	Warning/Advisory Record insert form serial No*
1		
2		
3		
4		

Remedial Action Taken numbering should correspond to defects above.

1	
2	
3	
4	

Details of Work carried out

CLEANED	

* Refer to separate Warning/Advisory Record

Record issued by: Signature

Print Name

Received by: Signature

Date appliance(s)/flue(s) checked

D. PERRY

14.7.2025

Tenant/Landlord/Homeowner/Agent

ATTENTION

Next safety
check due by:

23.7.26

See Notes A and B