Serial No:
1854467

To confirm the validity of the Registered Gas Engineer please contact Gas Safe on 0800 408 5500 or www.gassaferegister.co.uk

LANDLORD/HOMEOWNER GAS SAFETY RECORD

This form allows for the recording of results of checks as defined by the Gas Safety (Installation and Use) Regulations. Information recorded on this form does not confirm that the installation was installed by a Gas Safe registered business or that the installation complies with relevant Building Regulations.
Chimney/flue/outlets were visually checked for adequate evacuation of combustion products. A detailed internal inspection has not been undertaken.

HeatWorks With Liam

Gas Safe Register

DETAILS OF REGISTERED BUSINESS	JOB ADDRESS	LANDLORD/AGENT ADDRESS
HeatWorks with Liam Gas Safe Reg. No: 657315 49 Brecksfield, Skelton, York, YO30 1YE Tel. No: 07903 313 675	Name: Address: 71 EASTFIELD CRESCENT YORK, YO10 5HZ Tel. No: Is Accommodation Rented? (Y/N) Y	Name: MR MORAR Address: 16 YORK AVE LITTLE LEVER BOLTON, BL3 1EU Tel. No: 07947100955 No. Of Appliances Tested: 1

Gas Installation Pipework	Satisfactory Visual Condition (Y/N)	Emergency Control Accessible (Y/N)	Satisfactory Gas Tightness Test (Y/N)	Equipotential Bonding Satisfactory (Y/N)
	Y	Y	Y	Y

Appliance Details

	Appliance Location	Appliance Make	Appliance Model	Appliance Type	Type of Flue (OF/RS/FL)	Landlords Appliance (Y/N)	Appliance Inspected (Y/N)
1	Kitchen	BAXI	800 36kW	CHB	RS	Y	Y
2							
3							
4							
5							

Inspection Details

	Operating Pressure in mbar and or Heat Input in KW/Btu/h	Are Safety Devices Working? (Y/N)	Satisfactory Ventilation? (Y/N)	Flue Visual Condition (Pass/Fail/NA)	Flue Performance Checks (Pass/Fail/NA)	Combustion Analyser Reading CO: CO2 Ratio	Combustion Analyser Reading CO PPM	Appliance Serviced (Y/N)	Appliance Safe To Use (Y/N)
1	19mb	Y	Y	PASS	PASS	0.0020	181	Y	Y
2									
3									
4									
5									

CO Alarm

	Approved CO Alarm Fitted? (Y/N)	Does The CO Alarm Work? (Y/N)
1	Y	Y
2		
3		
4		
5		

	Defect(s) Identified	Warning Advice Issued? (Y/N)
1		
2		
3		
4		
5		

Work Carried Out

GAS VALVE ADJUSTED

Details Of Work Required

Received By:	J. MORAR	Issued By:	L. BATTY
Print Name:	J. MORAR	ID Card No:	657315
Date:	19/07/25	Signature:	LB
		Date:	19.7.25

The Next Gas Safety Check Must Be Completed By:
19.7.26

Top Copy : Agent/Landlord Middle Copy: Tenant Bottom Copy: Engineer

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