

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 3NQ
Tel:	07876 492221

INSPECTION/INSTALLATION ADDRESS	
Name & Title:	Vacant
Address:	17 St Mildas Mew York
Postcode:	YO10 3SF
Tel:	

LANDLORD (OR AGENT) NAME & ADDRESS (if applicable)	
Name & Title:	Hardcastle Properties
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	Landing	Vokey Unica 32	Baler	RS	19.9	Yes	NA	NA	0.003	0.021	Yes	Pass	Yes	Yes	Yes	Yes	Yes	Yes
2	Kitchen	Ariston, 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:
12/07/26

ISSUED BY (GAS ENGINEER)	
Print Name: J. Dawson	Signed: [Signature]
Licence No: 41304	Issue Date: 10/7/25
RECEIVED BY	
Received By: N/A	(Delete as applicable) Tenant/Agent/Landlord/Home Owner
Signed: _____	Print Name: _____
No one present at time of visit ☒	