

CRAIG BELL LTD PLUMBING & HEATING

10 MILLFEILD AVE , YORK, YO10 3ST, TEL- 07951419414
LICENCE NO. 5877047 REGISTRATION NO. 302755

I CERTIFY THAT I CARRIED OUT INSPECTIONS ON THE APPLIANCES DETAILED BELOW
SIGNED  INSPECTION DATE 01-07-25



LANDLORD/HOME OWNERS GAS SAFETY RECORD

THIS INSPECTION IS FOR GAS SAFETY PURPOSES ONLY TO COMPLY WITH THE GAS SAFETY (INSTALLATION & USE REGULATIONS. FLUES HAVE BEEN INSPECTED & CHECKED FOR SATISFACTORY EVACUATION OF PRODUCTS OF COMBUSTION. A DETAILED INSPECTION OF THE FLUE INTEGRITY, CONSTRUCTION AND LINING HAS **NOT** BEEN CARRIED OUT

INSPECTION/ INSTALLATION DETAILS	LANDLORD (OR AGENT) NAME & ADDRESS (if applicable)
NAME & TITLE: OCCUPIERS	NAME & TITLE: MR MARK SMITH
ADDRESS: FLAT 4, 12 PRIORY ST, YORK	ADDRESS: RAWCLIFFE LODGE, SHIPTON RD, YORK
POST CODE: YO1 6EX	POST CODE:
TEL:	TEL:

APPLIANCE DETAILS								FLUE TESTS		INSPECTION DETAILS						
	LOCATION	MAKE	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	COMBUSTION ANALYSER READING IF APPLICABLE	SATISFACTORY TERMINATION YES/NO/NA	FLUE VISUAL CONDITION PASS/FAIL/NA	ADAQUATE VENTILATION YES/NO	LANDLORD'S APPLIANCE YES/NO/NA	INSPECTED YES/NO	APPLAICANCE SERVICED YES/NO
1	BEDROOM	IDEAL	INSTINCT	CBI	RS	24KW	Y	NA	NA	8.8	Y	P	Y	Y	Y	N
2																
3																
4																
5																

GIVE DETAILS OF ANY FAULTS	RECTIFICATION WORK CARRIED OUT / WARNING NOTICE/ STICKER ISSUED

NEXT GAS SAFETY CHECK MUST BE CARRIED OUT WITHIN 12 MONTHS

SATISFACTORY VISUAL INSPECTION:	Y	EMERGENCY CONTROL ACCESSIBLE:	Y	SATISFACTORY GAS TIGHTNESS TEST:	Y	EQUIPOTENTIAL BONDING SATISFACTORY:	Y
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RECORD ISSUED BY: signed:- 

print:- CRAIG BELL

date:- 01/07/25

RECEIVED BY: signed:-

date:-

NUMBER OF APPLIANCES TESTED: ONE

KEY:- Y - YES N - NO P - PASS F - FAIL

CERTIFICATE SERIAL NUMBER:- BELL732