

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: 589033
Company: Reg Barman Plumbing & Heating
Address: 3 Ryedale Close, Skipton, North Yorkshire, BD21 1NY
Postcode: BD21 1NY
Tel: 0783 2227215

INSPECTION / INSTALLATION ADDRESS

Name & Title: ~
Address: 24 Long Mead Close, Badger Hill, York, Postcode: YO10 5JN Tel: ~

Number of appliances tested: 2

APPLIANCE DETAILS			FLUE TESTS			INSPECTION DETAILS											
Location	Make and Model	Type	Flue Type OFF/BS/FI	Operating pressure in mm of water or kWh or Btu/h	Safety device(s) correct operation Yes/No/NA	Spillage test Pass/Fail/NA	Smoke pellet 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. <i>Unclean Room</i>	<i>laser logic WAX824</i>	<i>System</i>	<i>BS</i>	<i>24kW</i>	<i>YES</i>	<i>NO</i>	<i>NO</i>	<i>CO96</i>	<i>CO96</i>	<i>YES</i>	<i>PASS</i>	<i>YES</i>	<i>YES</i>	<i>YES</i>	<i>YES</i>		
2. <i>Kitchen</i>	<i>CDA</i>	<i>Hob</i>	<i>Fr</i>	<i>19.5kW</i>	<i>YES</i>	<i>NO</i>	<i>NO</i>	<i>NO</i>	<i>NO</i>	<i>NO</i>	<i>YES</i>	<i>NO</i>	<i>NO</i>	<i>YES</i>	<i>YES</i>		
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 Satisfactory Visual Inspection: Yes No Emergency Control Accessible: Yes No Satisfactory Gas Tightness Test: Yes No Equipoential Bonding Satisfactory: Yes No

GIVE DETAILS OF ANY FAULTS

RECTIFICATION WORK CARRIED OUT

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:

ISSUED BY (GAS ENGINEER)

Print Name: *R. Barman* Signed: *Root*
Licence No: *589033* Issue Date:

RECEIVED BY

(Delete as applicable)

Tenant/Agent/Landlord/Home Owner

No one present at time of visit

Received By: Print Name:
Signed: