LANDLORD / HOME OWNER GAS SAFETY RECORD

Report Ref No: 45C 4624684

			OTHER COMMENTS OR OBSERVATIONS	Approved Audible CO Alarms Fitted & Located Correctly**:	5	4	ω	10	_	Gas Installation Satisfacton Pipework: Inspection:	5 200	4	3 BIM STORE	K.Z	Location		Tel: 0785	Postcode: Yo 31	Youk,	Address: Q Pyr	Company: Ros Bo	Reg No: 58033	REGISTERED BUSINESS DETAILS
		HUBBE JSF A GRASSING		Yes No N/A Are CO Alarms		1			GIVE DETAILS OF ANY FAULTS	For appliances not owned by the landlord the recorded 'Appliance Safe to Use' response is based on Satisfactory Visual Yes No Emergency Control Yes No Tightness Test: Yes Inspection:	carejjatjou" queor mar s	Children by Integral Stranger	loval Vasial C32	NON	Make and Model	APPLIANCE DETAILS	5 2227215	_		PYLLOGIT CLOSE	Bannor Pumbing + HEATING		AILS
		000 mg		n Date:		British			ULTS	Emer Acces	od sto		Come	Nos	Туре	LS	Post		T	Pi Dia		Nar	SNI
N	ō.			Yes,	00000	180000				rd the recorded Emergency Control Accessible:	10 8 10	SHIRTS.	Rs	fr.	Flue Type OF/RS/FL		Postcode:			(MDSAA	Address:	Name & Title:	INSPECTION / INSTALLATION ADDRESS
24/11/12/	BEFO!	SAFE	EXT	No		Smith p.				ed 'Appl	Shipsh	STA IS	32k4	19.5mb	Operating pressure in mbar or heat input kW/h or Btu/h		Y010		Your	Here	99	(/ INSTAL
101	RE:	マンド	GAS	N/A			A	+		Yes /	N. AST. TA	eleand	YES	SAK	Safety device(s) correct operation Yes/No/NA		SHR			Book	Newland		LATION /
Rece	Licen	Print		Testing Alarms		attention of	THE CASE			No	Dimmig	aldisa	NO	NO	Spillage test Pass/Fail/NA		Tel:			100			ADDRESS
Received By:	Licence No:	Print Name:		Testing of CO Alarms Satisfactory:	DESCRIPTION OF THE PERSON	ar Aside	0		REC	se' respo	10 36	e stole	7	20	Smoke pellet flue flow test Pass/Fail/NA	FLUE					Rome I	To No.	
	S	R.		Yes	the same	- 6 - 5	100		TIFICAT	sponse is base Satisfactory Gas Tightness Test:	HING.	V AN THE	Co 122	25	Initial combustion analyser reading	TESTS				DIST-LONG	Daive.		
	89033	Bannor.		\ \ \ \ \	1		RAPINS		RECTIFICATION WORK CARRIED OUT	ased on a	(10 th)	三出	(S 122	20	Final combustion analyser reading					noo -			
		tol do	ISSUED BY (GAS ENGINEER)	N/A		SAL STATE OF	1		ORK C/	is a	Necon	B) offu	SAK	YES	Satisfactory termination Yes/No/NA		Numb	Postcode:			Address:	Name & Title:	LANDL
RECEIVED BY (Delete as ap)		another.	BY (G/	Sr	d was pro	Sept and	S COLUMN		RRIED	No	in Con	THE TOTAL	PASS	PASS	Flue visual condition Pass/Fail/NA		Number of appliances tested:		back	THE		k Title:	ORD (OR
ED BY (Delete as applicable)	Issue Date:	Signed: _	SENG	noke/Heat cated & Fi	10.000	The state of	-		TUO	for obvio	Rich II	6	W.	YES	Adequate ventilation Yes/No	INSF	iances te	4042 2	CELNCTON	(Joseph	KINGE ISLAND	Haness	AGENT)
ED BY [Delete as applicable) Tenant/Agent/I and lord/Home (Numer	te:	366	INEER	Smoke/Heat Alarms Located & Fitted correctly**:		Ments of	THOS OF			No Equipotential Bonding Satisfactory:	Bligging	HOOK	YES .	X88	Landlord's appliance Yes/No/NA	INSPECTION DETAILS	sted:	2XP	3	5 846	1	0	NAME 8
d/Home Ov	24	RM)	tly**: Yes	2000	i i	1		2	ects on	W. Isua		X8.8	XES .	Inspected Yes/No	NDET		Tel:	AST YO	HB BILL	House	Churto	& ADDRE
	111/25	M		S V No	dir dog	1	1		Yes/No/NA	Yes Yes	adan.	Miles	YES Y1	A SA	Appliance Application Visual Ser Check Yes/No	AILS	2	l ass	NORKCHIPS	STILL ST	-	Proper	LANDLORD (OR AGENT) NAME & ADDRESS (if applicable)
No one present at time of visit		を		N/A				1		7 1	(1)	-	YES 9	YES Y	Appliance Safe Yes/No Y		2.	201	56.	30 - 100		Property 5	licable)
7				A					Yes/No/NA	No No			X18	. STA	Appliance Safe to Use Yes/No							29	

Copies:

White - Landlord/Agent/Home Owner Green - Engineer Pink - Tenant (if rented)

BF452411

* IF YES, PLEASE REFER TO SEPARATE WARNING NOTICE - DANGER DO NOT USE REPORT PAD

Form Ref. REGP45