## LANDLORD / HOME OWNER GAS SAFETY RECORD

Report Ref No: 45C

4624691

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.

copies.	Cories		Apr	5 4	ω	2	- 5	Gas	5	4 ω	N	_			Tel:	Pos		Add	Cor	Rec
Willie - Landord/Agent/Home Owner Green - En		OTHER COMMENTS OR OBSERVATIONS	Approved Audible CO Alarms Fitted & Located Correctly**: Yes No N/A				GIVE DETAILS OF ANY FAULTS	For appliances not owned by the landlord the recorded 'Appliance Safe to Use' response is based on a visual check for obvious defects only Pipework:  Satisfactory Visual Yes No Emergency Control Yes No Tightness Test: Yes No Bonding Satisfactory:	SHEED SHEED STREET STORY		STOWEY COA	Make and Model	APPLIANCE DETAILS		0785 222725		Francisco Constitution of the Constitution of	8 Pyront Constact	V. Pa Barrer D.	REGISTERED BUSINESS DETAILS
Engineer Pink - Ten		TIONS	o , s in Date:	Observative in test		1	ANY FAULTS	the landlord the Emergan					DETAILS		Po			HISTORY		IN.
Pink - Tenant (if rented)	22	nΩ≥	Yes /	TO THE PARTY OF				rd the recorded  Emergency Control Accessible:	THE BLUE		200	Flue Type OF/RS/FL	September 1		Postcode:		STATE OF THE STATE	Address:	Name & Little:	INSPECTION / INSTALLATION ADDRESS
ed)	25/ 11/26	EXT G. SAFET IECK L IEFOR	No N/A					ed 'Appliar trol Yes	1888 B	1000	24km	pressure in mbar or heat input kW/h or Btu/h			Y010 3L		X	329		/ INSTAL
	126	E A S	A					ance Sa	N. H. D.	1600	YES	device(s) correct operation Yes/No/NA			27		onk.	Hay	:	LATION
	Received Signed:	Print Name: Licence No:	Testing o	- County	100			No	SULPHAN S	1	NA	Spillage test Pass/Fail/NA	SALE TA		Tel: -		Order PAR	W KARD		ADDRESS
BF452411	ed By:	lame:	Testing of CO Alarms Satisfactory:	- 5	The Chill		RECT	e' respoi Satis	BL CAL	Z.		Smoke pellet flue flow test Pass/Fail/NA	FLUE				To a second	AD.	No. In	
2411		R. Barrer 589033	Yes X				RECTIFICATION WORK CARRIED OUT	sponse is base Satisfactory Gas Tightness Test:	S A IS	7	667	Initial combustion analyser reading	TESTS				15,000		Times.	
		4	No				ON WC	as Ye		3	667	Final combustion analyser reading	The state of				TOO III			
* IF YE	<b>1</b>	ISSUED BY (GAS ENGINEER) Signed: Issue Date:	N/A		1		)RK CA	n a visual		Z	SAK	Satisfactory termination Yes/No/NA		Numb		Postcode:	-	Address:	Name & Title:	LANDI
IF YES, PLEASE REFER TO SEPARATE	RECEIVED BY (Delete as app. Tenant/Agp Print Name	BY (GA	Sm		Total Control		RRIED	No		PASS	PASS	Flue visual condition Pass/Fail/NA		Number of appliances tested:		2	JHE (	S:	& Title:	LANDLORD (OR AGENT) NAME & ADDRESS (if applicable)
FER TO SEPA	VED BY (Delete as application) Tenant/Agen Print Name:	Signed:	Smoke/Heat Alarms Located & Fitted correctly**:			10000	TUO	or obvio		AE.		Adi Ven	INSF	liances to		0	Swar	KINCEISHER	HA	AGENT
RATE	ccable)	NEER)	Vlarms led correct			Schille		ous def uipotentia nding Sat		YhS	YES	Landlord's appliance Yes/No/NA	ECTIC	ested:		TO BOX		· ·	Hangis	) NAME
	'ED BY  (Delete as applicable) Tenant/Agent/Landlord/Home Owner rint Name:	PR	ly**: Yes				NO	ovious defects only Equipotential Bonding Satisfactory:	88	VEX		Inspected Yes/No	INSPECTION DETAILS		idi.	<u>.</u>		House	Church	& ADDR
		111/25	N N				WARNING NOTICE ISSUED Yes/No/NA	Yes		845	405 5		AILS	2		3 dinsauch		DV		ESS (if ap
Eorm Dof	No one present at time of visit		o N/A		1		*	No.		74.5	PAS	Appliance Sar serviced Sar Yes/No				26.	100		PROPERTIES	olicable)
DECO			A				WARNING TAG or LABEL FIXED Yes/No/NA	0		SAK	Sy.K	Appliance Safe to Use Yes/No							P	

BF452411

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

Form Ref. REGP45