LANDLORD / HOME OWNER GAS SAFETY RECORD

Report Ref No: 45C 6400600

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: 41304
Company: Abbey Plumbing + Heating
Address: 41 Kirkdale Road
York
Postcode: YO10 3NQ
Tel: 07816492221

INSPECTION / INSTALLATION ADDRESS

Name & Title: Vacant
Address: 196 Tang Hall Lane
York
Postcode: YO10 3RA Tel:

LANDLORD (OR AGENT) NAME & ADDRESS (if applicable)

Name & Title: G. Dykes
Address: 51A Heslington Road
York
Postcode: YO10 5AR Tel:

Number of appliances tested: 1

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	Toilet D.Stairs	Ideal Vogue C32	Baiter	RS	19.1	Yes	NA	NA	.0003	.0013	Yes	Pass	Yes	Yes	Yes	Yes	Yes	Yes
2																		
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:

27/10/27

ISSUED BY (GAS ENGINEER)

Print Name: Joe Dawson
Licence No: 41304
Signed:
Issue Date: 19-10-26

RECEIVED BY

Received By: N/A (Delete as applicable) Tenant/Agent/Landlord/Home Owner
No one present at time of visit ✓
Signed: ___ Print Name: ___

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

BF452603

* IF YES, PLEASE REFER TO SEPARATE

Form Ref REGP45

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