

LANDLORD/HOME OWNER
GAS SAFETY RECORD

This inspection is for gas safety purposes only in accordance with the current edition of the Gas Safety (Installation and Use) Regulations. Flues were 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.

GAS INSTALLER: (Trading Title)

Name:	C. ROBERTSON	Gas Safe Register No.:	157664
Address:	19, LEXINGTON ROAD, LAURENCE, YORK	Gas Installer Ref. No.:	1113
Post code:	YO30 5ZQ	Date of Issue:	26/7/23
Tel:	07710448500	Time of Issue:	
		Engineers Name: (print)	C. ROBERTSON

TENANT/HOME OWNER DETAILS

Tenant/Home Owner* Name: _____

Property Address: 81A, GICKLEHIRE _____

Post Code: _____ Tel: YORK _____

Tenant/Home Owner* present during inspection YES/NO _____

LANDLORD/AGENT DETAILS (if applicable)

Landlord/Agent* Name: NORMAN BLANDEN LTD _____

Address: 58, GICKLEHIRE _____

Post Code: _____ Tel: YORK _____

Landlord/Agent* present during inspection YES/NO _____

APPLIANCE DETAILS

INSPECTION DETAILS

FLUE TEST

RESULTS

LOCATION	MAKE	MODEL	TYPE	Flue Type e.g. CF or RS	Operating Pressure Mbar	Heat Input Kw	Safety Device Correct Yes/No	Ventilation Adequate Yes/No	CO Alarm fitted Yes/No	CO Alarm tested Pass/Fail	Flue Flow Test Pass/Fail	Spillage Test Pass/Fail	Termination Satisfactory Yes/No	Visual Condition Pass/Fail	Combustion Performance Reading CO ₂ / CO ₂ CO	Appliance Safe To Use Yes/No	Landlord's Appliance Yes/No	Inspected Yes/No
1	VICTOR	VS3000	HE	CS	18.7	✓	YES	N/A	YES	PASS	N/A	PASS	✓	PASS	0.0005	✓	✓	✓
2																		
3																		
4																		
5																		

DETAILS OF ANY FAULTS

REMEDIAL ACTION TAKEN

DETAILS OF WORK CARRIED OUT

LABEL & WARNING
NOTICE ISSUED

Yes NO

1. Meter in corner of room in case of gas leak break glass key to lock

Outcome of gas installation pipework visual inspection?

Pass / Fail / NA

Outcome of gas supply pipework visual inspection?

Pass / Fail / NA

Is the Emergency Control Valve access satisfactory?

Pass / Fail / NA

Outcome of gas tightness test?

Pass / Fail / NA

Is the Protective Equipotential bonding satisfactory?

Pass / Fail / NA

This Safety Record is issued by Gas Installer: (SIGNED)

Received on behalf of Landlord / Home Owner: (SIGNED)

Tenant/Landlord/Agent/Home Owner*

Number of appliances tested:

Date: 26/7/23

ATTENTION

Next safety
check due by:

29.7.24

To re-order quote code 663010-NUM

Copies: White - Landlord/Agent/Home Owner

Green - Registered Gas Installer

Pink - Tenant

* delete as applicable

1797998

ARCTIC
HAYES