

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: 225963  
Company: STEELSAFETY SERVICES  
Address: 12 York Rd  
Sutton Coldfield  
Postcode: B37 2YU  
Tel: 07799476565

## INSPECTION/INSTALLATION ADDRESS

Name & Title: THE OCCUPANT  
Address: 35 Broomfield St  
York  
Postcode: YO31 8LW  
Tel:

## LANDLORD (OR AGENT) NAME &amp; ADDRESS (if applicable)

Name & Title: Mr. R. PHELY  
Address: 112AED HASE FARM  
THORN  
NR RING  
Postcode: HU4 4AD  
Tel:

Number of appliances tested:

Two

## APPLIANCE DETAILS

Location	Make and Model	Type	Flue Type OF/RS/FL	Operating pressure in mbars 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 condition Yes/No/NA	Flue visual condition Pass/Fail/NA	Adequate ventilation Yes/No	Landlord's appliance Yes/No/NA	Inspected Appliance Visual Check Yes/No	Appliance serviced Yes/No	Appliance Safe to Use Yes/No
1 BATHROOM	IDEALJOURN 32 MAX	CHB	RS	18.35	Y	Y	NA	0004	0004	Y	Y	Y	Y	Y	Y	Y
2 KITCHEN	INDEP WPS807	COVER FL	8.89	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
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 ☐

Equipotential  
Bonding Satisfactory:

Yes ☒ No ☐

## GIVE DETAILS OF ANY FAULTS

## RECTIFICATION WORK CARRIED OUT

1	2	3	4	5	WARNING * NOTICE ISSUED Yes/No/NA	WARNING TAG or LABEL FIXED Yes/No/NA
2A	2A	2A	2A	2A	2A	2A
2B	2B	2B	2B	2B	2B	2B
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

None

## NEXT GAS

SAFETY  
CHECK DUE  
BEFORE:

18/12/24

## ISSUED BY (GAS ENGINEER)

Print Name: J. Fleming  
Licence No: 225963

Signed: 18/12/2023 J. Fleming

## RECEIVED BY

Received By:  
Signed:

(Delete as applicable)  
Tenant/Agent/Landlord/Home Owner  
Print Name:

No one present  
at time of visit ☐