

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: **558784**
Company: **PLC P+H**
Address: **17 THE GARDENS**
YORK
Postcode: **YO24 3NF**
Tel: **01592608496**

INSPECTION/INSTALLATION ADDRESS

Name & Title: **SARTON**
Address: **226 BUNTON STONE LANE**
CURTON
YORK
Postcode: **YO30 6EN** Tel: **07398268905**

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

Name & Title: **JOHN CAMPBELL**
Address: **33 RIVERSIDE DRIVE**
YORK
Postcode: **YO24 1DY** Tel:

Number of appliances tested: **TWO**

APPLIANCE DETAILS

Location	Make and Model	Type	Flue Type OF/RS/FL	Operating pressure in kWh or Btu/h	Safety device(s) correct operation Yes/No/NA	Spillage test Pass/Fail/NA	Smoke pilot flame 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 Visual Yes/No	Appliance Check Yes/No	Appliance serviced Yes/No	Appl Safe Yes/No
1 KITCHEN	Worcester SI	CH-8 R13	29.1	Y/N	N/A	N/A	N/A	N/A	0.0006	Y/N	Pass	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
2 KITCHEN	1485USE	1408 FIL	26.0MB	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
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

GIVE DETAILS OF ANY FAULTS

RECTIFICATION WORK CARRIED OUT

	Satisfactory Visual Inspection:	Yes	No	Emergency Control Accessible:	Yes	No	Satisfactory Gas Tightness Test:	Yes	No	Equipotential Bonding Satisfactory:	Yes	No
1												
2												
3												
4												
5												

OTHER COMMENTS OR OBSERVATIONS

NEXT GAS SAFETY CHECK DUE BEFORE:
11 / 10 / 25

ISSUED BY (GAS ENGINEER)

RECEIVED BY

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

BF452404

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

Form Ref. R1