

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: 531491  
 Company: SEAN GILL PUMPING & HEATING  
 Address: 12 WATFORDS  
DL16 16D  
 Postcode: YO25 5JQ  
 Tel: 07900818479

**INSPECTION/INSTALLATION ADDRESS**

Name & Title:  
 Address: 7 HAWLEY AVE  
YORK  
 Postcode: YO10 3TG Tel:

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

Name & Title: C. MARSHALL  
 Address: 16 FOX CLOSE  
DL16 16D  
 Postcode: YO25 5JQ Tel:  
 Number of appliances tested: ONE

**APPLIANCE DETAILS**

Location	Make and Model	Type
<u>BATHROOM</u>	<u>IDEAL LOGIC 635</u>	<u>COMBO</u>
<u>2</u>		
<u>3</u>		
<u>4</u>		
<u>5</u>		

**FLUE TESTS**

Operating pressure in boiler or heat input (kW/h or Btu/h)	Flue Type OF/RS/FL	Spillage test Pass/Fail/N/A	Smoke pellet flow test Pass/Fail/N/A	Initial combustion analyser reading	Final combustion analyser reading
<u>10.7</u>	<u>RS</u>	<u>N/A</u>	<u>N/A</u>	<u>0.007</u>	<u>0.007</u>
<u>2</u>					
<u>3</u>					
<u>4</u>					
<u>5</u>					

**INSPECTION DETAILS**

Satisfactory termination Yes/No/N/A	Flue visual condition Pass/Fail/N/A	Adequate ventilation Yes/No	Landlord's appliance Yes/No/N/A	Inspected Yes/No	Appliance Visual Check Yes/No	Appliance serviced Yes/No	Appliance Safe to Use Yes/No
<u>Yes</u>	<u>PASS</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>

**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

Equipoential Bonding Satisfactory: Yes  No

WARNING TAG or LABEL FIXED Yes/No/NA

**GIVE DETAILS OF ANY FAULTS**

1
2
3
4
5

**RECTIFICATION WORK CARRIED OUT**


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:**

04/07/25

**ISSUED BY (GAS ENGINEER)**

Print Name: S-GILL Signed: [Signature]  
 Licence No: 5782035 Issue Date: 04/07/2025

**RECEIVED BY**

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