



# Landlord Gas Safety Record

Cert. No. 755

Safety Inspection and reporting carried out in accordance with the Gas Safety (Installation and Use) Regulations 1998 section 26(9) and the Gas Industry Unsafe Situations Procedure.

## Simtec Plumbing And Heating

| Company / Installer |                                  | Job Address |           | Customer / Landlord |                                |
|---------------------|----------------------------------|-------------|-----------|---------------------|--------------------------------|
| Engineer            | Deklan Simpson                   | Name        |           | Name                | Corrina                        |
| Company             | Simtec Plumbing And Heating      | Address     | 2         | Company             | MBE Limited                    |
| Address             | Simtec Heating.The Raylor Centre |             | Bull Lane | Address             | villa farm wigginton road York |
|                     | James Street                     |             | York      |                     | York                           |
|                     | York                             | Post Code   | YO10 3EN  | Post Code           | YO32 2RH                       |
| Post Code           | YO103DW                          | Tel. No     |           | Tel. No             |                                |
| Tel No.             | 01904412109                      |             |           |                     |                                |
| Gas Safe Reg        | 3916101                          |             |           |                     |                                |
| ID Card No.         | 3916101                          |             |           |                     |                                |

| Appliance Details |          |                |         |                     |           | Inspection Details   |                     |                           |                   |                         |        |       |                        |        |       |                                    |                                    |   |                       |                    |                       |
|-------------------|----------|----------------|---------|---------------------|-----------|----------------------|---------------------|---------------------------|-------------------|-------------------------|--------|-------|------------------------|--------|-------|------------------------------------|------------------------------------|---|-----------------------|--------------------|-----------------------|
| No.               | Location | Appliance Type | Make    | Model               | Flue Type | Landlord's Appliance | Appliance Inspected | Operating Pressure (mbar) | Heat Input (kW/h) | High Combustion Reading |        |       | Low Combustion Reading |        |       | Safety device(s) correct operation | Ventilation Provision satisfactory | Visual condition of flue and termination satisfactory | Flue Performance test | Appliance Serviced | Appliance safe to use |
|                   |          |                |         |                     |           |                      |                     |                           |                   | Ratio                   | CO ppm | CO2 % | Ratio                  | CO ppm | CO2 % |                                    |                                    |   |                       |                    |                       |
| 1                 | Kitchen  | Hob            | Unknown | Unknown             | NA        | Yes                  | Yes                 | NA                        | 7                 | Na                      | Na     | Na    | Na                     | Na     | Na    | No                                 | Yes                                | NA  | NA                    | NA                 | Yes                   |
| 2                 | Kitchen  | Boiler         | Ideal   | Logic Max Combi C35 | NA        | Yes                  | Yes                 | 20.1                      | 35                | 0.0005                  | 69     | 7.4   | Na                     | Na     | Na    | Yes                                | Yes                                | Yes   | Pass                  | Yes                | Yes                   |
| 3                 |          |                |         |                     |           |                      |                     |                           |                   |                         |        |       |                        |        |       |                                    |                                    |   |                       |                    |                       |
| 4                 |          |                |         |                     |           |                      |                     |                           |                   |                         |        |       |                        |        |       |                                    |                                    |   |                       |                    |                       |
| 5                 |          |                |         |                     |           |                      |                     |                           |                   |                         |        |       |                        |        |       |                                    |                                    |   |                       |                    |                       |
| 6                 |          |                |         |                     |           |                      |                     |                           |                   |                         |        |       |                        |        |       |                                    |                                    |   |                       |                    |                       |

| Defects / Identified |   |  |  |  |  |  |  |  |  |  | Labels and Warning Notice Issued |  |  |  |  | CO Alarm(s)                         |  |      |
|----------------------|---|--|--|--|--|--|--|--|--|--|----------------------------------|--|--|--|--|-------------------------------------|--|------|
| 1                    | No safety devices on hob Failed ignition Advise - new hob |  |  |  |  |  |  |  |  |  | NA                               |  |  |  |  | CO Alarm(s) fitted                  |  | Yes  |
| 2                    |   |  |  |  |  |  |  |  |  |  | NA                               |  |  |  |  | CO Alarm(s) tested and Satisfactory |  | Pass |
| 3                    |   |  |  |  |  |  |  |  |  |  |                                  |  |  |  |  |                                     |  |      |
| 4                    |   |  |  |  |  |  |  |  |  |  |                                  |  |  |  |  |                                     |  |      |
| 5                    |   |  |  |  |  |  |  |  |  |  |                                  |  |  |  |  |                                     |  |      |
| 6                    |   |  |  |  |  |  |  |  |  |  |                                  |  |  |  |  |                                     |  |      |

|  |  |                 |
|--|--|-----------------|
| Emergency Control Accessible <input checked="" type="checkbox"/> Yes                             | Gas Tightness Satisfactory <input checked="" type="checkbox"/> Yes | <b>Comments</b> |
| Gas Installation Pipework Visual Inspection Satisfactory <input checked="" type="checkbox"/> Yes |  |                 |
| Equipotential Bonding <input checked="" type="checkbox"/> Yes                                    |  |                 |
| <b>NEXT INSPECTION DUE BEFORE</b> 14-Mar-2027  |  |                 |

| Signatures                 |                         | Date |             |
|----------------------------|-------------------------|------|-------------|
| Issued by: Signed          | Received Signed by:     | Date | 12-Mar-2026 |
| Print Name: Deklan Simpson | Print Name: Mrs Corrina |      |             |