



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: 187700
Company: G BARRAS HEATING
Address: 3 THE CHEBROTS
WIGAN, WOL
Postcode: W03 2TB
Tel: 01942 07951013404

INSPECTION / INSTALLATION ADDRESS

Name & Title: S FRANCES STREET
Address: YORK
Postcode: YO10 4DP
Tel:

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

Name & Title: DAD HUGHES
Address: WILKINSON HOUSE
1 WETHERBY ROAD
Postcode:
Tel:

Number of appliances tested: 1

APPLIANCE DETAILS				FLUE TESTS				INSPECTION DETAILS			
Location	Make and Model	Type	Flue Type OFF/ON/FL	Operating pressure in bar or kPa or Btu/h	Safety device(s) correct operation Yes/No/NA	Spillage test Pass/Fail/NA	Smoke potted test flow test Pass/Fail/NA	Initial combustion rate Yes/No	Final combustion rate Yes/No	Satisfactory ventilation Yes/No/NA	Appliance Safe to Use Yes/No
1 KITCHEN	IDEAL LOGIC	BE	AS B3141/1/1		YES					YES	YES
2											
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 Pipework: Satisfactory Visual Inspection: Yes ☒ No ☐ Emergency Control Accessible: Yes ☒ No ☐ Satisfactory Gas Tightness test: Yes ☒ No ☐ Equipment Bonding Satisfactory: Yes ☒ No ☐

GIVE DETAILS OF ANY FAULTS				RECTIFICATION WORK CARRIED OUT			
1							
2							
3							
4							
5							

Approved Audible CO Alarms Fitted & Located Correctly: Yes ☒ No ☐ Are CO Alarms in Date: Yes ☒ No ☐ N/A ☐ Smoke/Heat Alarms Located & Fitted correctly: Yes ☒ No ☐ N/A ☐

OTHER COMMENTS OR OBSERVATIONS

NEXT GAS SAFETY CHECK DUE BEFORE: 14/10/17

ISSUED BY (GAS ENGINEER)

Print Name: G BARRAS Signed: G BARRAS
Licence No: 6020412 Issue Date: 01/10/16

RECEIVED BY

Received By: D Hughes
Signed: D Hughes
Print Name: D Hughes
No one present at time of visit ☐

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

BF452/001

* IF YES, PLEASE REFER TO SEPARATE WARNING NOTICE - DANGER DO NOT USE REPORT P40

Form Ref. REGP45