To confirm the validity of the gas operative please contact Gas Safe Register on Tel: 0800 408 5500

Serial No. 6883340

LANDLORD/HOME OWNER GAS SAFETY RECORD

This form allows the recording of the results of the required checks as defined by the Gas Safety (Installation and Use) Regulations.
Chimney systems were inspected visually and checked for satisfactory evacuation of products of combustion, a detailed internal inspection of the chimney system has not been carried out.
The information recorded on this form does not confirm that the installation was installed by a person licensed by Gas Safe Register nor that the installation complies with any relevant Building Regulations.

Registered Business Details
Reg No: 144949
Company: ALLCAR SERVICES LTD
Address: 86 GREEN PASTURES
HEYTON MORTON
Postcode: SK4 3RA
Tel No:

Job Address
Name:
Address: FLAT 19
DAVID JAMES COURT
Postcode:
Tel No:

Landlord Details (or where appropriate their agent)
Name:
Address:
Postcode: Tel No:
No. of appliances checked 2

APPLIANCE DETAILS

	Location	Appliance Type	Make	Model	Chimney/Flue Type (OF/RS/FL)	Landlord's Appliance (Yes/No/NA)	Appliance Checked (Yes/No)
1	KITCHEN	CHB	WORCESTER	G-STAR	RS	YES	YES
2	KITCHEN	CKR	LAMONA	HOB	OF	YES	YES
3							
4							

INSPECTION / SAFETY CHECKS

	Ventilation Satisfactory (Yes/No)	Operating Pressure or Heat Input (mbar/kW)	Safety Device(s) Correct Operation (Yes/No/NA)
1	YES	22kW	YES
2	YES	7kW	YES
3			
4			

CHIMNEY CHECKS

	Visual Condition Satisfactory (Yes/No/NA)	Chimney/Flue Performance (Pass/Fail/NA)
1	YES	PASS
2	YES	NA
3		
4		

COMBUSTION READING(S)

	Initial (If Applicable)	Final (If Applicable)
1	0.0006	0.0006
2	—	—
3		
4		

SUMMARY

	Appliance Serviced (Yes/No)	Appliance Safe (Yes/No)
1	NO	YES
2	NO	YES
3		
4		

AUDIBLE CO DETECTOR

	Correctly Installed (Yes/No/NA)	In Date (Yes/No/NA)	Test Satisfactory (Yes/No/NA)
1			
2			
3			
4			

DEFECT(S) IDENTIFIED

		Warning Notice Serial No.(s)*
1		
2		
3		
4		

REMEDIAL ACTION TAKEN

1	
2	
3	
4	

Emergency Control Valve Satisfactory	Yes/No YES
Main Protective Bonding Satisfactory (Visual)	Yes/No YES
Gas Installation Pipework Satisfactory (Visual)	Yes/No YES
Gas Tightness Test Satisfactory	Yes/No/NA YES

OTHER OBSERVATIONS / COMMENTS

NEXT SAFETY CHECK DUE BEFORE 01/06/18

Issued by:
Print Name: N. JOHNSON Signed: [redacted]
Licence No: [redacted] Issue Date: 1-6-18

Received by: Tenant / Landlord / Agent / Other (please state) _____ No one present at the time of visit ☐
Signed: _____ Print Name: _____

* Refer to separate Warning Notice

Key: **Top Copy** – Landlord/Managing Agent/Home Owner **Second Copy** – Tenant **Third Copy** – Registered Business

To re-order quote Ref. CP12

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