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Serial No. B6349102

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.
The information recorded on this form does not confirm that the installation was installed by a Gas Safe registered engineer or that the installation complies with any relevant Building 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.

Registered Business Details REG NO 194949
Gas operative NEIL JOHNSON (Print name)
Operative licence No. 4012754
Company ALGAS SERVICES LTD
Address 56 GRAN PRIMROSE HEATON MERSEY
Postcode SK4 3RA Tel No.

Job Address
Name (Mr/Mrs/Miss/Ms)
Address FLAT 19 DAVID MANN COURT
Postcode
Tel No.

Landlord (or where appropriate their agent)
Name (Mr/Mrs/Miss/Ms)
Address
Postcode Tel No.
Number of appliances tested 2

APPLIANCE DETAILS

	Location	Appliance type	Make	Model	Landlord's appliance Yes/No/NA	Appliance inspected Yes/No	Flue type OF/RS/FL
1	KITCHEN	CUB	WORCESTER	G·STAR	YES	YES	RS
2	KITCHEN	CKE	LAMONA	HOB	YES	YES	OF
3							
4							

INSPECTION DETAILS

	Operating pressure in mbar or heat input in kW	Initial combustion analyser reading (if applicable)	Final combustion analyser reading (if applicable)	Safety device(s) correct operation Yes/No/NA	Ventilation provision satisfactory Yes/No	Visual condition of chimney/termination satisfactory Yes/No/NA	Flue performance checks Pass/Fail/NA	Appliance serviced Yes/No	**Appliance safe to use Yes/No**
1	21KW	0.0006	0.0006	YES	YES	YES	PASS	NO	YES
2	7KW			YES	YES	NA	NA	NO	YES
3									
4									

AUDIBLE CO ALARM

	Approved CO alarm fitted Yes/No/NA	Is CO alarm in date Yes/No/NA	Testing of CO alarm satisfactory Yes/No/NA
1			
2			
3			
4			

DEFECT(S) IDENTIFIED

		If Warning/Advice Notice issued insert serial No*
1		
2		
3		
4		

REMEDIAL ACTION TAKEN

1	
2	
3	
4	

Gas installation pipework satisfactory visual inspection Yes/No YES
Emergency Control Valve (ECV) accessible Yes/No YES
Satisfactory gas tightness test Yes/No/NA YES
Protective equipotential bonding satisfactory Yes/No YES

NEXT SAFETY CHECK DUE WITHIN 12 MONTHS

This Safety Record issued by: Signe [redacted]
Print Name: N. JOHNSON
Received by: Signed *Tenant/Landlord/Agent/Home Owner*
Date appliance(s)/chimney(s) checked: 2.6.17

Key: **Top Copy** – Landlord/Managing Agent/Home Owner **Green Copy** – Tenant **Yellow Copy** – Registered Business

* Refer to separate Warning/Advice Notice

To re-order quote Ref. CP12

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