## BUSINESS LOGO HERE

## **Business Name**

1 Gas Lane, Gasville, GA5 5SS

Tel: 00000 000 000 | Fax: 00000 000 000

Email: xxxxx@xxxxxxxxx.co.uk

## LANDLORD / HOME OWNER GAS SAFETY RECORD

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.

No. 0001



Business Name:  Gas Safe No:  Address:  Fig. No:  Tel. No:  Tel. No:  Satisfactory Visual Inspection YES NO:  Emergency Control Accessible YES NO:  Satisfactory Visual Inspection YES NO:  Appliance Datis  Appliance Datis  Appliance Datis  Inspection Datais  Inspection Datais  Conductor Free Injust W/Biblin Accessing Visual Inspection Yes No:  Appliance Datis  Inspection Datais  Conductor Free Injust W/Biblin Accessing Visual Inspection Yes No:  Appliance Datis  Inspection Datais  Conductor Free Injust W/Biblin Accessing Visual Inspection Yes No:  Appliance Datis  Inspection Datais  Conductor Free Injust W/Biblin Accessing Visual Inspection Yes No:  Date:  Bissued Ity:  Bissued by:  Bissued by:  Bissued by:  Bissued by:  Date:  The North Address:  Fig. No:  Fig. No:  Appliance Date:  Conductor Free Injust W/Biblin Accessing Visual Inspection Yes No:  Appliance Date:  Defact(s) Identified  Warming Advice Insued by:  Bissued by:  Bissued by:  Date:  The North Address:  Address:  Address:  Address:  Fig. No:  Address:  Address:  Address:  Fig. No:  Appliance Type  Appliance Type  Appliance Type of Fitue  (OFRS-FL)  Appliance Date:  Co Alarm  Appliance Co Alarm  Appliance Date:  Appliance Date:  The North Accessing Advice Insued to Appliance Free Insued Type  Appliance Control Accessing Acc	Deta	nils Of Registered Business			Job	Job Address						Landlord/Agent Address					
Gas Safe No: Engineer Name: Gas Safe ID Card No: Tal N																	
Address Tel. No: Tel.																	
Tel. No: Is Accommodation Rented? YES: NO: Is Accommodation Rented? YES: NO: No. Of Appliances Tested:    Cas Installation Pipework   Satisfactory Visual Inspection YES: NO:   Emergency Control Accossible VES: NO:   Satisfactory Gas Tightness Yes: NO:   Equipotential Bonding Satisfactory VES: NO:   Appliance Details																	
Tel. No:    Is Accommodation Rented?   YES    No    Satisfactory Visual Inspection   YES    No    Emergency Control Accessible   YES    No    Satisfactory Gas Tightness Test   YES    No    Equipotential Bonding Satisfactory   YES    No    Appliance   No    Emergency Control Accessible   YES    No    Satisfactory Gas Tightness Test   YES    No    Equipotential Bonding Satisfactory   YES    No    Appliance   No    Emergency Control Accessible   YES    No    Satisfactory Gas Tightness Test   YES    No    Equipotential Bonding Satisfactory   YES    No    Appliance   Tightness Test   YES    No    Equipotential Bonding Satisfactory   YES    No    Appliance   Tightness Test   YES    No    Equipotential Bonding Satisfactory   YES    No    Appliance   Tightness Test   YES    No    Equipotential Bonding Satisfactory   YES    No    Emergency Control Accessible   YES    No    Emergency Control   Appliance   Tightness Test   YES    No    Equipotential Bonding Satisfactory   YES    No    Emergency Control   Appliance   Tightness Test   YES    No    Equipotential Bonding Satisfactory   YES    No    Emergency Control   Appliance   Appliance   Tightness Test   YES    No    Emergency Control   Tightness Test   YES    No    Tightness Test   Tightness Tes	Addı	ress				$\top$											
Cast Installation Pipework   Satisfactory Visual Inspection   YESI   NO   Emergency Control Accessible YESI   NO   Satisfactory Sas Tightness Test YESI   NO   Satisfactory YeSI   NO   Satisfacto						Tel N	Tel No:						Tel. No:				
Appliance Details  Appliance Model Appliance Model Appliance Type (PFRSFL) Appliance? (Y/N) Appliance? (Y/N) Appliance? (Y/N) Inspection Details  Inspection Details  Operating Pressure in mbar and/or heat input kW/Bluh Appliance? (Y/N) Vendializor? (Y/N) Vendializor? (Y/N) Pressure in mbar and/or heat input kW/Bluh Appliance? (Y/N) Vendializor? (Y/N) Pressure in mbar and/or heat input kW/Bluh Appliance? (Y/N) Vendializor? (Y/N) Pressure in mbar and/or heat input kW/Bluh Approximate Condustion Analysis Reading Approximate Serviced? (Y/N) Selection Details  Condustry Reading Approximate Condustry Reading Serviced? (Y/N) User? (Y/N) User? (Y/N) User? (Y/N) User? (Y/N) User? (Y/N) User? (Y/N) Inspection Details Of Work Carried Out  Defect(s) Identified Warning Advice Issued (Y/N) Warning Advice Issued (Y/N) Issued by: Issued by: Ib Card No: The Next Cas Safety Check	Tel. No:						Is Accommodation Rented? YES□ NO□						No. Of Appliances Tested:				
Appliance Details  Appliance Make Appliance Model ApplianceType Type of Flue Landlords Appliance? (Y/N) Inspection Details    1	Gas	Installation Pipework Sati	sfactory Visua	al Inspection YES□ N	Contro	ontrol Accessible YES NO Satisfactory Gas Tightness Test YES 1						NO Equipotential Bonding Satisfactory YES NO					
Appliance Location Appliance Make Appliance Model ApplianceType Type of Flue (OF/RSFL) Appliance (OF/RSFL)					- Intergency										,		
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The Next Gas Safety Check  The		Appliance Location		Appliance Make		Appliance Model Appliance Type					Гуре		(OF/RS/FL)		Appliance Inspected? (Y/N)		
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