

GAS INSTALLATION / SAFETY RECORD

Serial No.

Work recorded on this form should be carried out by a competent, registered gas engineer / operative in accordance with the current Gas Safety (Installation & Use) Regulations, Building Regulations and any manufacturers instructions.



ALL-SERV

HEATING & ELECTRICAL ENGINEERS

Customer / Tenant / Pitch or Location: (delete as applicable)
Name: P. Ferguson
Address: Flat 3 Nicola Gardens
WALLASEY
Postcode: CH45 4JB

Address: 25 Pembroke Ave
Blaekpoe Postcode: W42 9PX
Tel No. 624091
Gas Safe Registration No. 624091

Landlord / Letting Agent / Park: (delete as applicable)
Name: Mr M gardens
Address: top flat B
196 WALLASEY RD
Postcode: CH45

NB. To Customer, Tenant Landlord or Responsible Person.
It is important that the company details above and the Gas Safe registration number are filled in by the gas engineer / operative working on site.
Gas Safe may be contacted to check registration, ask the attending gas engineer / operative for the Gas Safe contact telephone number.

Type of Work Done (tick box) Safety Check Installation Service Repairs
Meter / Emergency Control Accessible? Yes No Gas Meter and Installation (visible) Pipework Satisfactory? Yes No Gas Installation Tightness Test Satisfactory? Yes No
Is the Installation Safe to Use: (Yes/No) Y

Fuel Type: (tick box) Natural Gas L.P.G.

Appliance Details:	Answer	1	2	3	4	5	6
LOCATION		Bedroom					
OWNER							
TYPE		Boiler					
MAKE		worcester					
MODEL		25i					
FLUE TYPE	RS / OF / FL	W					
FUEL TYPE	NG / LPG	NG					
INSPECTED / SERVICED	I / S	I					
VENTILATION SATISFACTORY	Y / N / NA	NA					
SAFETY CONTROL(S) WORKING	Y / N / NA	Y					
FLUE TERMINATION SATISFACTORY	Y / N / NA	Y					
FLUE VISUAL CHECK	P / F / NA	P					
FLUE FLOW SATISFACTORY	P / F / NA	NA					
SPILLAGE TEST SATISFACTORY	P / F / NA	NA					
WORKING PRESSUR or HEAT INPUT	mbar, kW/h	23.6KW					
FLUE GAS ANALYSIS PERFORMED	Y / N / NA	Y					
ANALYSIS RESULT CO / CO2 RATIO	%	.0009					
APPLIANCE SAFE TO USE	Y / N	Y					
WARNING LABEL ATTACHED	Y / N	N					
WARNING NOTICE ISSUED	Y / N	Y					
REASON CODE - ID / AR / NCA							

Appliance	Detailsof any faults / remedial work required:	Details of any work carried out:
1	gas meter not found	
2		
3	no isolation in flat	
4		
5		
6		

I certify that the above work was carried out by myself on the (date of work done) Date: 27/08/21
The customer / tenant / landlord / responsible person has been informed of any faults / remedial work required to bring the installation up to standard.

Operative Name: (in capitals) S. Cal Signed: (by Operative) S. Cal Gas Safe Card Serial No. 624091
Customer Name: (in capitals) MR L GARDNER Signed: (by Customer) [Signature] Number of Appliances Tested: