

Serial No:
16670212

To confirm the validity of the Registered Gas Engineer please contact Gas Safe on 0800 408 5500 or www.gassaferegister.co.uk

LANDLORD/HOMEOWNER GAS SAFETY RECORD

This form allows for the recording of results of checks as defined by the Gas Safety (Installation and Use) Regulations. Information recorded on this form does not confirm that the installation was installed by a Gas Safe registered business or that the installation complies with relevant Building Regulations. Chimney/flue/outlets were visually checked for adequate evacuation of combustion products. A detailed internal inspection has not been undertaken.



DETAILS OF REGISTERED BUSINESS

JOB ADDRESS

LANDLORD/AGENT ADDRESS

DONNELLY ECO GAS SERVICES LTD
 Gas Safe Reg. No: 501028
 1 Cook Street, Birkenhead,
 Wirral, CH41 2QX
 Tel. No: 0151 666 1262

Name: X Criss
 Address: 76 Elmwood Road
Birkenhead
CH42 7HT
 Tel. No:

Name: Pent Wines
 Address:
 Tel. No:
 No. Of Appliances Tested: 1
 Is Accommodation Rented? (Y/N) yes

Gas Installation Pipework Satisfactory Visual Condition (Y/N) _____ Emergency Control Accessible (Y/N) _____ Satisfactory Gas Tightness Test (Y/N) _____ Equipment Bonding Satisfactory (Y/N) _____

Appliance Location		Appliance Make		Appliance Model		Appliance Type		Type of Flue (OF/RS/FL)	Landlords Appliance (Y/N)	Appliance Inspected (Y/N)
1	<u>Bedroom</u>	<u>Fluorcom</u>	<u>Flexicom 24CT</u>	<u>Combi</u>	<u>12.5</u>	<u>yes</u>	<u>yes</u>			
2										
3										
4										
5										

Inspection Details						Combustion Analyser Reading				CO Alarm	
Operating Pressure in mbar and or Heat Input in kW/Btu/h	Are Safety Devices Working? (Y/N)	Satisfactory Ventilation? (Y/N)	Flue Visual Condition (Pass/Fail/NA)	Flue Performance Checks (Pass/Fail/NA)	CO: CO2 Ratio	CO PPM	Appliance Serviced (Y/N)	Appliance Safe To Use (Y/N)	Approved CO Alarm Fitted? (Y/N)	Does The CO Alarm Work? (Y/N)	
<u>19mb 24kw</u>	<u>yes</u>	<u>yes</u>	<u>Pass</u>	<u>Pass</u>	<u>8.8car 0003</u>	<u>120</u>	<u>yes</u>	<u>yes</u>	<u>no</u>	<u>no</u>	
2											
3											
4											
5											

Defect(s) Identified	Warning Advice Issued? (Y/N)	Work Carried Out	Details Of Work Required

Received By: X Issued By: D Jones ID Card No: 501028
 Print Name: X Signature: [Signature] Date: 19.5.21 Date: 19.5.21

The Next Gas Safety Check Must Be Completed By: 18-6-22