

To confirm the validity of the Registered Gas Engineer please contact Gas Safe on 0800 408 5577 or www.gassaferegister.co.uk

SERIAL NO:
731621

LANDLORD/HOMEOWNER



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.

JG Plumbing and Gas Solution 63a Elm Park Rd N3 1EG Tel. No: 07846 735 485 Gas Safe Reg. No: 523252 Engineer Name: Jan Galik Gas Safe ID Card No: 2578416	INSPECTION ADDRESS		AGENT/LANDLORD DETAILS (if different)	
	Name: <u>G. Baret</u>		Name/Company: <u>/</u>	
	Address: <u>7 BELSIZE TERRACE</u>		Address: <u>/</u>	
	<u>LONDON</u>			
	<u>NW3 4AX</u>			
	Tel. No:		Tel. No:	
	Is accommodation rented? YES ☒ NO ☐		No. of Appliances tested:	

GAS INSTALLATION PIPEWORK			Emergency Control Valve Accessible? (Y / N)	
Is Equipotential Bonding satisfactory? (Y/N)	<u>Yes</u>	Visual Inspection satisfactory? (Y / N)	<u>Yes</u>	Gas Tightness Test satisfactory? (Y / N)
				<u>Yes</u>

APPLIANCE SPECIFICS				
	Appliance 1	Appliance 2	Appliance 3	Appliance 4
Location of appliance	<u>Bedroom</u>			
Appliance type	<u>Boiler</u>			
Appliance make	<u>Valiant</u>			
Appliance model	<u>637 Eco Tec</u>			
Type of flue/outlet (OF/RS/FL)	<u>R/S</u>			
Working pressure in mbar or heat input kW/Btu/h	<u>19.5 mbar</u>			
Are safety devices working? (Yes/No/NA)	<u>Yes</u>			

FLUE TESTS				
Spillage (Pass/Fail/NA)	<u>N/A</u>			
Smoke Pellet (Flue Flow) (Pass/Fail/NA)	<u>N/A</u>			
Satisfactory termination (Yes/No/NA)	<u>N/A</u>			
Visual condition (Pass/Fail/NA)	<u>N/A</u>			

INSPECTION				
Has this appliance been inspected (Yes / No)	<u>Yes</u>			
Is this appliance owned by the Landlord (Yes/No)	<u>Yes</u>			
Is there satisfactory ventilation? (Yes/No)	<u>Yes</u>			
Has the appliance been serviced? (Yes/No)	<u>Yes</u>			
Combustion performance reading CO:CO2 ratio / CO2 / CO	<u>0.00.2</u>			
Is this appliance safe to use? (Y / N)	<u>Yes</u>			
If No - has a warning advice notice been issued? (Y / N)	<u>No</u>			

DEFECT (s) DETECTED				
Appliance 1	Appliance 2	Appliance 3	Appliance 4	
<u>/</u>	<u>/</u>	<u>/</u>	<u>/</u>	

REMEDIAL WORK UNDERTAKEN				
Appliance 1	Appliance 2	Appliance 3	Appliance 4	
<u>/</u>	<u>/</u>	<u>/</u>	<u>/</u>	

Received By Signature: <u>James Galik</u>	Registered Engineer Signature: <u>[Signature]</u>
Print Name: <u>James Galik</u>	Print Name: <u>[Name]</u>
Date: <u>6-7-12</u>	Date: <u>09.03.2012</u>

THE NEXT GAS SAFETY CHECK MUST BE COMPLETED WITHIN THE NEXT 12 MONTHS

Top Copy - Gas User Middle Copy - Agent/Landlord Bottom Copy - Gas Safe Registered Engineer

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BUILDING REGULATIONS COMPLIANCE

This is a Building Regulations Compliance Certificate:

LANDLORD/HOME OWNER GAS SAFETY RECORD

Serial No: 45 4016196

REGISTERED BUSINESS DETAILS

Reg No: 517765

Gas Engineer: *Sam Reading*

Gas Safe registered engineer No:

Company: *BT Call Plumbing & Heating Solutions Ltd*

Address: *12 Anchor Close*

Cusshurst

Postcode: *CV8 0PJ*

Tel No: 0207873113

I certify that I carried out inspections on the appliances detailed below.

Signed: *SL*

Inspection Date: 30-7-2013

INSPECTION/INSTALLATION ADDRESS

Name & Title: *Neil Goodwin*

Address: *Hydrex Park*

Post Code: *RM3 4AX*

Tel: 07710 421622

LANDLORD (OR AGENT) NAME & ADDRESS (if applicable)

Name & Title: *Barrett Fiddell Ltd*

Address: *88 Mill Lane*

London

Post Code: *NW6 1NL*

Tel:

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.

APPLIANCE DETAILS

Location	Make	Model	Type	Flue type CHRS/FL	Operating pressure in kWh or Btu/h	Safety device(s) correct operation Yes/No/NA	Sludge test Pass/Fail/NA	Smoke pilot flow test Pass/Fail/NA	Combustion rate reading (if applicable)	Satisfactory ventilation Yes/No/NA	Flue visual corrosion Pass/Fail/NA	Appliance safe to use Yes/No
1 bathroom	Vaillant	ecotec 644	boiler	P/S	24kw	Yes	PASS	N/A	N/A	YES	PASS	YES
2												
3												
4												
5												

FLUE TESTS

Smoke pilot flow test Pass/Fail/NA	Combustion rate reading (if applicable)	Satisfactory ventilation Yes/No/NA	Flue visual corrosion Pass/Fail/NA	Appliance safe to use Yes/No
N/A	N/A	YES	PASS	YES

INSPECTION DETAILS

Landlords appliance Yes/No/NA	Inspected Yes/No	Appliance safe to use Yes/No
YES	YES	YES

Gas Installation
Pipework:

Satisfactory Visual
Inspection:

Yes ☒ No ☐

Emergency Control
Accessible:

Yes ☒ No ☐

Satisfactory Gas
Tightness Test:

Yes ☒ No ☐

Equipment
bonding satisfactory:

Yes ☒ No ☐

GIVE DETAILS OF ANY FAULTS

1	
2	
3	
4	
5	

RECTIFICATION WORK CARRIED OUT

	WARNING NO TAG ISSUED Yes/No/NA	WARNING TAG OR STICKER FIXED Yes/No/NA

Number of appliances tested:

This record is issued by:

Signed:



Received on behalf of the Landlord/Home Owner:

White - Landlord/Agent/Home Owner Green - Engineer Pink - Tenant (if rented)

SAFETY CHECK MUST BE CARRIED OUT WITHIN 12 MONTHS

Print Name: *SR Reading*

Date: 30-7-2013

Tenant/Agent/Landlord/Home Owner (delete as applicable)

Date: 30-7-2013

451306

* IF YES, PLEASE REFER TO SEPARATE



Certificate Reference

Certificate No: Gerald Barrett / NW34ax

Client Details

Inspection Details

Remedial Work

Gas ID number:

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