



# LANDLORD/HOME OWNER GAS SAFETY RECORD

Safety Inspection and reporting carried out in accordance with the Gas Safety (Installation and Use) Regulations 1998.

Certificate Reference: **RB412**

DETAILS OF THE CONTRACTOR		DETAILS OF THE INSTALLATION		DETAILS OF THE CLIENT/LANDLORD	
Trading Title:	Priority Home Service Limited	Installation Address:	Rented 251 Crookesmoor Road Sheffield	Client Address:	West One Lettings 134 Whitham Road Sheffield
Address:	Unit 4, Neepsend Triangle 1 Burton Road Sheffield		Post Code: S6 3FQ		Post Code: S10 2SR
Gas Safe No:	539093	Telephone No:	0330 9991999	Telephone No:	0114 2296823

APPLIANCE DETAILS							
	Location	Appliance Type	Make	Model	Flue Type	Landlord's Appliance	Appliance Inspected
1	Kitchen	CHB	Ideal	Logic plus Combi 24 4734865	RS	Yes	Yes
2							
3							
4							

INSPECTION DETAILS								AUDIBLE CO ALARM			
	Combustion Analyser Reading	Operating Pressure in mbar or heat input in kW	Safety Devices(s) Correct Operation	Ventilation Provision Satisfactory	Visual Condition of Flue and Termination Satisfactory	Flue Performance Test	Appliance Serviced	Appliance Safe To Use	Approved CO alarm fitted	Is CO alarm in date	Testing of CO alarm satisfactory
1	0007,8.67,61	26.68kw	Yes	Yes	Yes	N/A	Yes	Yes	Yes	Yes	Yes
2											
3											
4											

DEFECT(S) IDENTIFIED		REMEDIAL ACTION TAKEN		NOTICE & LABEL ISSUED
1				
2				
3				
4				

Outcome of gas installation pipework visual inspection	<b>PASS</b>	Is the Emergency Control Valve access satisfactory	<b>YES</b>	Outcome of gas tightness test	<b>PASS</b>
Outcome of gas supply pipework visual inspection	<b>PASS</b>	Is the Protective Equipotential bonding satisfactory	<b>YES</b>	NEXT INSPECTION DUE ON OR BEFORE:	<b>22/12/2017</b>

SIGNATURES		Report Issued By: Name:		Signed:		Date Inspected:		Gas ID No:	
		Rich Baker				22/12/2016		3498362	
		Report Received By: Name:		Signed:		Date Received:			

# LANDLORD/HOME OWNER GAS SAFETY RECORD CHECK LIST

## GUIDANCE FOR RECIPIENT (to be appended to the Certificate)

1. Check with the occupant to ascertain any problems with the gas installation and appliance(s).
2. Check that there is an adequate supply of air to all gas appliances.
3. Check the operation of appliance, control taps, ignition system and any flame supervision devices fitted.
4. Check the flame picture of any burner(s).
5. Check clearances from combustible materials e.g. kitchen cupboards etc.
6. Check the stability of the appliance (including provision of bracket or hook and chain on gas cookers).
7. Check gas installation pipe work and where appropriate any flexible connection(s).
8. Open-flues
  - (a) Check the condition and full route (where practicable) of the flue and, where applicable, the suitability of any terminal/chimney pot fitted.
  - (b) Check the appliance flue connection to any chimney or flue-liner. In the case of a back boiler installation, check all pipe ducts or voids entering the builder's opening including the annular space around any flue liner/flue connection are sealed.
  - (c) Carry out flue flow check.
  - (d) For a gas fire, check and clear the catchment space and check that any dampers have been removed or fixed in the open position.
  - (e) Test the appliance for spillage using any guidance given in the manufacturer's instructions.
9. Room - sealed appliances
  - (a) Check case and sight glass seal on appliance, replace as necessary.
  - (b) Check position of terminal, clearances from corners etc. vegetation and terminal guard fitted as appropriate.
10. Ensure the operating gas pressure or heat input rate or, where necessary, both are correct.
11. Test all controls to ensure satisfactory operation.
12. Test all disturbed gas connections for tightness using leak detection fluid, carry out full gas tightness test if required.
13. Advise the gas user of any defects/further work required or recommend as necessary.