Serial No: вм 070201

Site Address

Tel No:

2 3 4

2 3 4

Name (Mr/Mrs/Miss/

Location

Operating pressure in

mbar or heat input kW

Ventilation provision

satisfactory

Yes/No

Gas Installation Pipework Satisfactory Visual Inspection Yes/No

**IDENTIFIED DEFECT(S)** 

**Emergency Control Valve Accessible** 

**Equipotential Bond Satisfactory** 

Satisfactory Gas Tightness/Soundness Test

Audible Carbon Monoxide Alarm Tested

## ANDLORD GAS SAFETY RECORD



This form allows the recording of the results of the required checks defined by the Gas Safety (Installation and Use) Regulations.

The information recorded on this form does not confirm that the installation was installed by a Gas Safe registered engineer or that th installation complies with any relevant Building Regulations.

Flues were 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 type

Chimney/flue and

termination condition

satisfactory Yes/No/NA

						REGISTER
he required checks Regulations.  confirm that the dengineer or that the dengineer of the fluid arried out.	he Gas enging Gas Safe Companie Address:	Gas Safe ID card licence No: (Print name)				
		Postcode: Tel No: Number of appliances tested /				
		lumber of	appliances tested			
D	ETAILS OF API	PLIANCE				
ype Vo	Make Voher		Model inspect Yes/N		l appliance	Flue type OF/RS/FL
DE	TAILS OF INSI	DECTION				
		PECTION			Safaty daying(s) same	-tti
Flue in voids checked Yes/No		CO/CO <sub>2</sub> ratio		3/	Safety device(s) correct operation Yes/No/NA	
ey/flue and on condition ry Yes/No/NA	lition check		s serviced		Appliance safe to use Yes/No	
	rning/Advice Noti		REMEDIAL AC	CTION TAK	EN	Paragraph (
		1				
		2				
	,					
		4			4	
Yes/No Yes/No Yes/No Yes/No Yes/No Yes/No	This Safety Reco	gned	Mre	603/2	Tenant/Landlord/Agen	nt/Home Owner

**NEXT SAFETY CHECK DUE WITHIN 12 MONTHS**