Rech

LANDLORD/HOME OWNER GAS SAFETY RECORD

Report Ref No: 45C 3527488

GISTERED BUSINESS DI	ETAILS	INS	PECTION	I/INSTALL	ATION AD	DDRESS				LANDL	ORD (OR	AGENT)	NAME	& ADDF	RESS (if	applicable	
leg No: 573333			Name & Title:							Name & Title:							
Company: SAAGEOGAS		Add	Address: 7 PATELEY CLOSE							Address:							
ddress: VEVIA	CAOSI		a april	KIRK	CBY									- YALL			
Biera	JHEAD			CIVI	ERPOR	00											
stcode: CHUIGEP										Postcode:				Tel:			
0-1901	+7:3592	Pos	stcode: (320	101.	Tel:				Numb	er of app	liances t	ested:	ON	E(1)		
1	APPLIANCE DETA	ILS					FLUE	TESTS		100		INSI	PECTION	ON DE	TAILS		
Location	Make and Model	Туре	Flue Type OF/RS/FL	heat input	Safety device(s) correct operation	Spillage test Pass/Fail/NA	Smoke pellet flue flow test Pass/Fail/NA	Initial combustion analyser reading	Final combustion analyser reading	termination	Flue visual condition Pass/Fail/NA	ventilation	Landlord's appliance Yes/No/NA	Vas/No	Appliance Visual Check Yes/No	Appliance serviced Yes/No	Appliance Safe to U Yes/No
BATHROOM	IDEAL INSTINCT 2	NG	05	20mb	The second second	A	NA	SEL	(04)	475	PASS	475	YES	45	45	10	15
571141250-1	THE TRESTRUCTE	100		201110			1011								1613-0		
	are to present the business of the	mayin		all write		BINGS					M Huj		linbies				
Installation Satisfa	appliances not owned by the la	Emer	gency Cossible:	ntrol	liance Sa	afe to Us	Sati	ense is ba	as v	./	check i	E	quipoten	itial		Yes _	No
	actory Visual Vos	Emer	gency Co	ntrol	/	nfe to Us	Sati	isfactory G	as v	./	check i	E	quipoten	itial	ory:	ING *	
Installation Satisfa	actory Visual Vos	Emer Acces	gency Co	ntrol	/	No	Sati Tigh	isfactory G	ias Ye	s V	No	E B	quipoten onding S	itial	ory:	ING * N	LABEL FIXE
Installation Satisfa	actory Visual Yes No	Emer Acces	gency Co	ntrol	/	No	Sati Tigh	isfactory G ntness Tes	ias Ye	s V	No	E B	quipoten onding S	itial	WARN NOTICE IS	ING * N	LABEL FIX
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Installation Satisfa Inspect	GIVE DETAILS OF ANY F	ACCES AULTS CO ns in Date:	gency Cossible:	NoN	ves	No	Sati Tigh	isfactory G intness Tes	ias Ye	DRK CA	No	Smoke/He_ocated &	quipoten conding S eat Alarms Fitted con	rectly**:	WARN NOTICE IS	ING * N	No
Installation Satisfa Inspector Inspe	GIVE DETAILS OF ANY F Yes No N/A Are C Alarm MENTS OR OBSERVATIONS	AULTS Ons in Date:	rgency Cossible:	ontrol Y	VesN/A	No	Satisfactor	rifications of the state of the	ias Ye	DRK CA	No	Smoke/He_ocated &	quipoten conding S eat Alarms Fitted cor	rectly**:	WARN NOTICE IS	ING * N	LABEL FIX
Installation Satisfa Inspector Inspe	GIVE DETAILS OF ANY F Yes No N/A Are C Alarm MENTS OR OBSERVATIONS C C C 2 1 6 m3	AULTS Ons in Date:	Yes Co	No_NEXT (SAFEHECK	GAS TY DUE	No	Satisfactor	risfactory Gottness Tes	ION WO	DRK CA	No	Smoke/He ocated & Signed	quipoten conding S eat Alarms Fitted con	rectly**:	Yes L	No No	N/A
Installation Satisfa Inspector Sed & Located Correctly*: OTHER COMPONENTS OF SERVICE	GIVE DETAILS OF ANY F Yes No N/A Are C Alarm MENTS OR OBSERVATIONS Lo C R: 2 1 6 m3 H I: 21 411	AULTS Ons in Date:	Yes Co	No_N SAFE	GAS TY DUE	No	Satisfactor	risfactory Gottness Tes	ias Ye	DRK CA	No	Smoke/He ocated & Signed Issue D	quipotent onding Stat Alarms Fitted corr IGINEE Cate:	rectly**:	Yes L	ING * N	N/A
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Installation Satisfa Inspector of the Company of th	GIVE DETAILS OF ANY F Yes No N/A Are C Alarm MENTS OR OBSERVATIONS Lo C R: 2 1 6 m3 H I: 21 411	AULTS Ons in Date:	Yes C	No_NEXT (SAFEHECK	GAS TY DUE RE:	Testing Alarms Print Licer	REC g of CO s Satisfactor Name: nce No:	risfactory Gottness Tes	ION WO	DRK CA	No	Smoke/He ocated & AS EN Signed Issue D	quipotent onding Stat Alarms Fitted corr IGINEE Cate:	rectly**:	Yes L	No or	N/A

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

BF452312

* IF YES, PLEASE REFER TO SEPARATE WARNING NOTICE - DANGER DO NOT USE REPORT PAD

Form Ref. REGP45