

# Smart Plumbing Ltd

## Plumbing & Heating Specialists

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### GAS INSTALLATION/SAFETY RECORD

Serial No.

2841

The work recorded on this form should be carried out by a competent registered gas engineer and accordance with the current Gas Safety (Installation & User) Regulations

<b>Customer/Tenant</b> (delete as applicable)	Landlord's details (if applicable).
Name: <u>Sally Warner Estates</u>	Name and Address:-
Address: <u>45 Priest Avenue</u>	<u>9 New Court Street</u>
<u>Canterbury Kent</u>	<u>CHATHAM KENT</u>
Post code <u>CT2 8PJ</u>	<u>Canterbury Kent</u>
Tel No.	<u>CT4 7LT</u>
	Tel No. <u>01227 733888</u>

Type of work done (tick)	Date of work carried out	2	6	0	8	1	3
INSTALLATION	LANDLORD'S SAFETY CHECK	<input checked="" type="checkbox"/>	SERVICES	REPAIRS			
Gas Installation <b>TIGHTNESS TEST</b> carried out (tick)	YES	<input checked="" type="checkbox"/>	NO	PASS	<input checked="" type="checkbox"/>	FAIL	

Appliance Details	1	2	3	4
TYPE of appliance and flue type, i.e. RS or OF	<u>RS</u>	<u>HOB</u>		
MAKE	<u>Worcester</u>	<u>unknown</u>		
MODEL	<u>25Si</u>	<u>unknown</u>		
LOCATION	<u>kitchen</u>	<u>kitchen</u>		
Is the ventilation correct? (Y/N)	<u>Y</u>	<u>Y</u>		
Are termination and route of flue satisfactory? (Y/N)	<u>Y</u>	<u>N/A</u>		
Is the flue satisfactory? (Y/N)	<u>Y</u>	<u>N/A</u>		
Was the spillage test satisfactory? (Y/N)	<u>N/A</u>	<u>N/A</u>		
Appliance working pressure (see notes).	<u>0 mBar</u>	<u>N/A</u>		
Safety device correct operation. (Y/N)	<u>Y</u>	<u>Y</u>		
Is appliance safe for use? (Y/N)	<u>Y</u>	<u>Y</u>		

*NB. Flues are only visually inspected from the exterior for integrity and proper clearance of products by the way of smoke test.*

FINDINGS	YES	NO
Is appliance safe for use?	<input checked="" type="checkbox"/>	
If <b>NO</b> has the customer been informed, the appliance isolated, and a warning label attached to the appliance?		
Has any part of the installation been classified as sub-standard and the customer informed?		<input checked="" type="checkbox"/>
Is there evidence of electrical cross bonding at the gas meter?	<input checked="" type="checkbox"/>	
Are emergency controls correctly positioned and labelled?	<input checked="" type="checkbox"/>	
Details of any defects and remedial work required:-		

*All the above work has been carried out in accordance with current gas safety regulations and procedures. The customer has been informed of any defects and remedial work required to bring the installation up to standard*

Engineer's name (Printed) Jim Smart Signature [Signature] Dated 26.8.13.  
Customer's name (Printed) ..... Signature ..... Dated .....

**Top white copy to customer or landlord, blue copy to tenant, pink copy to be kept by installer.**