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## LANDLORD/HOME OWNER GAS SAFETY RECORD

Report Ref No: 45C 6975633

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.

REGISTERED BUSINESS DETAILS				INSPECTION/INSTALLATION ADDRESS							LANDLORD (OR AGENT) NAME & ADDRESS (if applicable)							
Reg No: 20688				Name & Title:								Name & Title: GM 4 SM MARRS						
Company: C CANGEUTINERS OF SON				Address: 28 FUTSHILL STREET								Address: Foldestal Faid						
Address: LONGEROFT KIREZKIOS				CAUSEB								WICTON						
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Postcode: CA7 SRA -												Postcode: CA7 SAD Tel: 0/6973 4245/						
Tel: 016973 51288				Postcode: CA / 2HL Tel:								Number of appliances tested: QNG						
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	AILS	FLUE TESTS						ALC: N	INSPECTION DETAILS									
Location		Make and Model	Туре	Flue Type OF/RS/FL	Operating pressure in mbar or heat input kW/h or Btu/h	Safety device(s) correct operation Yes/No/NA	Spillage test Pass/Fail/NA	Smoke pellet flue flow test Pass/Fail/NA	Initial combustion analyser reading	Final combustion analyser reading	Satisfactory termination Yes/No/NA	condition	Adequate ventilation Yes/No	Landlord's appliance Yes/No/NA	Inspected Yes/No	Appliance serviced Yes/No	Appliance Safe to Use Yes/No	
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Audible CO Approved Alarms: Alarms Fit	CO Yes 1	No N/A	Are CO Alarms in	Data: Ye	s V No	N/A	4	Testing	of CO Satisfactor	Yes	No	N/A		Smoke Alarms Fit	tod. Yes	V No	N/A	
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OTHER CO	MMENTS	OR OBSERVATIONS	3		IEXT (					18	SUED	BY (GA	S ENGI	NEER)	1	49/43		
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14	16	018	120	Rece	ceived By: AND ORD (Delete as applicable) Tenant/Agent/Landlord/Home Owner at time of visit													