

GAS ENGINEER'S DETAILS

Reg. Trading Title: BOULVE GAS SAFE REG No: 538588
 Company Address: SUITE 299, 2 WINDOOWNE CRESCENT, BOULVENMOUTH
 Postcode: BH1 1SP Tel: 473922
 Engineer Name: D. WOOLFENDEN ID Card No: _____

I certify that I carried out inspections of the appliances detailed below.
 Signed: [Signature] *Inspection Date: 28.8.14

INSPECTION/INSTALLATION ADDRESS

Name & Title: _____
 Address: 31 BRIGHTON ROAD BOULVENMOUTH.
 Postcode: _____ Tel: _____

LANDLORD (OR AGENT) NAME AND ADDRESS (if applicable)

Name & Title: J. MUGROVE
 Address: _____
 Postcode: _____ Tel: _____

LANDLORD/HOME OWNER GAS SAFETY RECORD



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 the products of combustion. A detailed internal inspection of the flue integrity, construction and lining has NOT been carried out.

	APPLIANCE DETAILS					FLUE TESTS				INSPECTION DETAILS						
	Location	Make	Type	Model	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	Satisfactory termination Yes/No/NA	Flue visual condition Pass/Fail/NA	Adequate ventilation Yes/No	Landlord's appliance Yes/No/NA	Inspected Yes/No	Appliance serviced Yes/No	Appliance safe to use Yes/No
1	KITCHEN	VISSMANA	COMB		RS	20	YES	-	YES	PASS	YES	YES	YES	NO	NO	YES
2																
3																
4																
5																

Gas Installation Pipework: Satisfactory Visual Inspection: Yes No
 Emergency Control Accessible: Yes No
 Satisfactory Gas Tightness Test: Yes No
 Equipment bonding satisfactory: Yes No

GIVE DETAILS OF ANY FAULTS		RECTIFICATION WORK CARRIED OUT	
1			
2			
3			
4			
5			

Number of appliances tested: 1 NEXT SAFETY CHECK MUST BE CARRIED OUT WITHIN 12 MONTHS
 This record is issued by: [Signature] Signed: _____ Print name: D.J. WOOLFENDEN Date: 28.8.14.
 Received on behalf of the Landlord/Home Owner: _____ Signed: _____ Tenant/Agent/Landlord/Homeowner (Delete as applicable) Date: _____