

Serial No

LABWS072606

LANDLORD/HOMEOWNER GAS SAFETY RECORD

This record can be used to document the outcomes of the checks and tests required by The Gas Safety (Installation and Use) Regulations. Some of the outcomes are as a result of visual inspection only and are recorded where appropriate. Unless specifically recorded no detailed inspection of the flue lining, construction or integrity has been performed. Registered Business/engineer details can be checked at www.gassaferegister.co.uk or by calling 0800 408 5500.



Gas safe is a registered trade mark of HSE and is used under licence.

Details of Registered Business

Gas Safe Register No 595896
 Registered Engineer's Name MARTIN TOWNSEND
 Gas Safe Register Licence Number _____
 Business VEDO PLUMBING AND HEATING
 Address 7 GREENWAY, FULWOOD, PRESTON,
 Postcode PR2 9TS
 Contact No 07584207837

Details of Site

Name (Mr/Mrs/Miss/Ms) CRAIGIAN STEAN
 Address 167 EMMANUEL, SPOOR, PRESTON
 Postcode _____
 Contact No _____

Details of Customer/Landlord (or agent where appropriate)

Name (Mr/Mrs/Miss/Ms) CRAIGIAN STEAN
 Address 66 Church Road
CUBBER DOWN, ASKOR
ROCKHILL FOREST
 Postcode SLS 8RR
 Contact No _____

Number of Appliances tested 2

Appliance Details

Location of	Type	Manufacturer	Model	Owned by Landlord/homeowner Yes/No	Inspected Yes/No	Type of flue
1 kitchen	Bouler Hob	BAXI HAIN	ECO ELITE 25 4 PING HOBS.	YES	YES	RS
2 kitchen	HOB	LANCIA		YES	YES	F/L
3						
4						

Inspection Details

Operating pressure in mbar and/or heat input kW/h or Btu/h	Operation of safety device(s)	Ventilation satisfactory	Visual condition of flue and termination	Flue operation checks	Combustion analyser reading (if applicable)	Appliance serviced	CO Alarm fitted	CO Alarm tested (if fitted)	SAFE TO USE
1 18.2	Pass	YES	Pass	Pass	0.0006	NO	YES	NA	YES
2 19.9	Pass	YES	Pass/NA	Pass	---	NO	NO	NA	YES
3									
4									

Defect(s) Identified

Defect(s) Identified	GUSSP classification eg. AR, ID	Warning/Advisory Record insert form serial No*
1		
2		
3		
4		

Remedial Action Taken numbering should correspond to defects above.

Details of Work carried out

ADVISE FITTING CO PLUMB.

* Refer to separate Warning/Advisory Record

select as appropriate and relevant

Outcome of gas installation pipework visual inspection? Pass / Fail/NA
 Outcome of gas supply pipework visual inspection? Pass / Fail/NA
 Is the Emergency Control Valve access satisfactory? Pass / Fail
 Outcome of gas tightness test? Pass / Fail/NA
 Is the Protective Equipment bonding satisfactory? Pass / Fail

Record issued by: Signature [Signature]
 Print Name MARTIN TOWNSEND
 Received by: Signature [Signature]
 Date appliance(s)/flue(s) checked 12/11/2018

ATTENTION
 Next safety check due by:
12/11/2019

Please ask your merchant for other licensed Gas Safe Register branded records & labels in this range

Top Copy - Landlord/Homeowner/Managing Agent Green Copy - Tenant Yellow Copy - Registered Business

Serial No

LABWS072607

LANDLORD/HOMEOWNER GAS SAFETY RECORD

This record can be used to document the outcomes of the checks and tests required by The Gas Safety (Installation and Use) Regulations. Some of the outcomes are as a result of visual inspection only and are recorded where appropriate. Unless specifically recorded no detailed inspection of the flue lining, construction or integrity has been performed. Registered Business/engineer details can be checked at www.gassaferegister.co.uk or by calling 0800 408 5500.



Gas safe is a registered trade mark of HSE and is used under licence.

Details of Registered Business

Gas Safe Register No 595896
Registered Engineer's Name MARVIN TOWNSEND
Gas Safe Register Licence Number _____
Business VEFO PLUMBING AND HEATING
Address 7 GREENWAY, FULWOOD, PRESTON

Postcode PR2 9TS
Contact No 07584207837

Details of Site

Name (Mr/Mrs/Miss/Ms) _____
Address 2 ALBERT ROAD
PRESTON.

Postcode _____
Contact No _____

Details of Customer/Landlord (or agent where appropriate)

Name (Mr/Mrs/Miss/Ms) GRAHAM SLOAN
Address 66 CHURCH ROAD
CHAVEY DOWN, PLOT
BLACKVEN FOREST

Postcode SLS 8QZ
Contact No _____

Number of Appliances tested

2

select as appropriate and relevant

Outcome of gas installation pipework visual inspection? Pass / Fail/NA
Outcome of gas supply pipework visual inspection? Pass / Fail/NA
Is the Emergency Control Valve access satisfactory? Pass / Fail
Outcome of gas tightness test? Pass / Fail/NA
Is the Protective Equipotential bonding satisfactory? Pass / Fail

Appliance Details

Location of	Type	Manufacturer	Model	Owned by Landlord/Homeowner Yes/No	Inspected Yes/No	Type of flue
1 FRONT BED	BOILER	ALPHA	INTEC 30	YES	YES	RS
2 KITCHEN	COOKER	ZANNUSSI		YES	YES	FL
3						
4						

Inspection Details

	Operating pressure in mbar and/ or heat input kW/h or Btu/h	Operation of safety devices(s)	Ventilation satisfactory	Visual condition of flue and termination	Flue operation checks	Combustion analyser reading (if applicable)	Appliance serviced	CO Alarm fitted	CO Alarm tested (if fitted)	SAFE TO USE	
										Pass/Fail/NA	Yes/No
1	18.2	PASS	YES	PASS	PASS	0.0006	NO	NO	NA	YES	YES
2	—	FAIL	YES	PASS	PASS	—	NO	NO	NA	NO	NO
3											
4											

Defect(s) Identified

-
- NO STABILITY BRACKET OR CHAIN ON COOKER
- BROCKEN INTEGRITY ON 2 OF 4 RINGS NEED CLEANING
- VIEW REQUIRED DEEP CLEAN

Remedial Action Taken numbering should correspond to defects above.

Details of Work carried out

AR

GIUSP classification eg. AR, ID

Warning/Advisory Record insert form serial No*

* Refer to separate Warning/Advisory Record

ATTENTION

Next safety check due by:

12/11/2019

Record issued by: Signature [Signature]

Print Name MARTIN TOWNSEND

Received by: Signature _____

Date appliance(s)/flue(s) checked 12/11/2018

Tenant/Landlord/Homeowner/Agent