



**D E Gas Services**

# Landlord Gas Safety Record

Cert. No. LLS\_556

Safety Inspection and reporting carried out in accordance with the Gas Safety (Installation and Use) Regulations and the Gas Industry Unsafe Situations Procedure.

### Company / Installer

Engineer Dave Elson  
 Company D E Gas Services  
 Address 00  
 Woodhead Close  
 Ossett  
 WEST YORKSHIRE  
 Post Code WF59JJ  
 Tel No. 07588579121  
 Gas Safe Reg 523320  
 ID Card No. 4164277

### Job Address

Name Kate McFadzean - Ferguson  
 Address 32  
 Autumn Avenue  
 Leeds  
 Post Code LS6 1RE  
 Tel. No 07883547497

### Customer / Landlord

Name  
 Company C/O The Landlord Shop  
 Address 19  
 Henconner Drive  
 Chapel Allerton  
 Leeds  
 Post Code LS73NR  
 Tel. No 07866022380

### Appliance Details

### Inspection Details

	Location	Appliance Type	Make	Model	Flue Type	Landlord's Appliance	Appliance Inspected	Operating Pressure (mbar)	Heat Input (kW/h)	High Combustion Reading			Low Combustion Reading			Safety device(s) correct operation	Ventilation Provision satisfactory	Visual condition of flue and termination satisfactory	Flue Performance test	Appliance Serviced	Appliance safe to use
										Ratio	CO ppm	CO2 %	Ratio	CO ppm	CO2 %						
1	Front Room	Combi Boiler	Vokera	Vision 30C	RS	Yes	Yes	19	25	.0002	24	8.4	NA	NA	NA	Yes	Yes	Yes	NA	No	Yes
2																					
3																					
4																					
5																					
6																					

### Defects / Identified

### Labels and Warning Notice Issued

### CO Alarm(s)

### Smoke Alarm(s)

1																					
2																					
3																					
4																					
5																					
6																					

NA

CO Alarm(s) fitted

Yes

Smoke Alarm(s) fitted

Yes

CO Alarm(s) tested and Satisfactory

Pass

Smoke Alarm(s) tested and Satisfactory

Pass

Emergency Control Accessible  Yes Gas Tightness Satisfactory  Yes

Gas Installation Pipework Visual Inspection Satisfactory  Yes

Number of Appliances Tested  Equipotential Bonding  Yes

NEXT INSPECTION DUE ON OR BEFORE

### Comments

### Signatures

Issued by: Signed

Received Signed by:

Date

Print Name

Print Name