

LANDLORD/HOME OWNER GAS SAFETY RECORD

Serial No: **P45 1828888**

REGISTERED BUSINESS DETAILS

Reg No: **352134**

Gas Engineer: **L. BRUCE-TENET**

Gas Safe registered engineer No: **3584453**

Company: **TENET PUMPING AND HTG.**

Address: **15 GADSDENS ROAD, CHANFIELD**

Postcode: **BD23 0JF** Tel No: **0134 751988**

I certify that I carried out inspections on the appliances detailed below.

Signed: **[Signature]** Inspection Date: **26-06-15**

Name & Title: **2 GADSDENS ROAD, CHANFIELD**

Address: **BD23 0JF** Tel: **0134 751988**

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.

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

Name & Title: **Caroline & Mike**

Address: **26-06-15**

Post Code: **BD23 0JF** Tel: **0134 751988**

APPLIANCE DETAILS

Location	Make	Model	Type	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 flow test Pass/Fail/NA	Combustion analyser reading (if applicable) Yes/No/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	IDEAL	LOGIC	40 AS	19.04	YES	NA	NA	NA	0.0085	YES	PASS	YES	YES	YES	YES	YES
2																
3																
4																
5																

FLUE TESTS

INSPECTION DETAILS

Gas Installation Satisfactory Visual Inspection: Yes ☒ No ☐ Emergency Control Accessible: Yes ☒ No ☐ Satisfactory Gas Tightness Test: Yes ☒ No ☐ Equipotential bonding satisfactory: Yes ☒ No ☐

GIVE DETAILS OF ANY FAULTS

RECTIFICATION WORK CARRIED OUT

1																
2																
3																
4																
5																

Number of appliances tested: **1**

This record is issued by: **[Signature]**

Signed: **[Signature]**

Received on behalf of the Landlord/Home Owner: **[Signature]**

Signed: **[Signature]**

NEXT GAS SAFETY CHECK MUST BE CARRIED OUT WITHIN 12 MONTHS

Print Name: **BRUCE-TENET**

Date: **26-06-15**

Date: **26-06-15**

E451308

* IF YES, PLEASE REFER TO SEPARATE WARNING/ADVICE NOTICE

Form Ref. REGP