

Serial No.
B 4499420

LANDLORD/HOME OWNER GAS SAFETY RECORD

To confirm the validity of the gas operative please contact Gas Safe Register on Tel: 0800 408 5500

This form allows the recording of the results of the required checks as defined by the Gas Safety (Installation and Use) Regulations. The information recorded on this form does not confirm that the installation was installed by a Registered Installer or that the installation complies with any relevant Building Regulations. Chimney systems were inspected visually and checked for satisfactory evacuation of products of combustion, a detailed internal inspection of the chimney system has not been carried out.



Registered Business Details REG NO Q11953
 Gas operative JON CONSTABLE (Print name)
 Operative licence No. 3173562
 Company QAS PLUMBING + HEATING LTD
 Address 1 SHIRE CUVAN LIVER
BUCKS
 Postcode SLO 9EL Tel No. 01753653333

Job Address
 Name (Mr/Mrs/Miss/Ms) _____
 Address 299A UPPER RICHMOND ROAD
WEST
 Postcode SW14 8QS
 Tel No. _____

Landlord (or where appropriate their agent)
 Name (Mr/Mrs/Miss/Ms) _____
 Address FEATHERSTONE LETCH
 Postcode _____ Tel No. _____
 Number of appliances tested 1

APPLIANCE DETAILS		APPLIANCE DETAILS		APPLIANCE DETAILS		APPLIANCE DETAILS		APPLIANCE DETAILS	
Location	Appliance type	Make	Model	Landlord's appliance Yes/No/NA	Appliance inspected Yes/No	Flue type OF/RS/FL	Is CO alarm in date Yes/No/NA	Testing of CO alarm satisfactory Yes/No/NA	
1 BATHROOM	BOILER	ALPHA	CB24	YES	YES	RS	-	-	
2									
3									
4									

INSPECTION DETAILS										
Operating pressure in mbar or heat input in kW	Initial combustion analyser reading (if applicable)	Final combustion analyser reading (if applicable)	Safety device(s) correct operation Yes/No/NA	Ventilation provision satisfactory Yes/No	Visual condition of chimney/termination satisfactory Yes/No/NA	Flue performance checks Pass/Fail/NA	Appliance serviced Yes/No	Appliance safe to use Yes/No	Approved CO alarm fitted Yes/No/NA	Is CO alarm in date Yes/No/NA
1 22.5kW	-	-	YES	YES	YES	NA	NO	YES	-	-
2										
3										
4										

DEFECT(S) IDENTIFIED

1	GAS PIPE NOT VISIBLY SLOPED THROUGH WALL INTO FLAT.	
2		
3	NO VISIBLE EQUIPOTENTIAL BONDING	
4		

REMEDIAL ACTION TAKEN

1		
2		
3		
4		

IF WARNING/ADVICE NOTICE ISSUED INSERT SERIAL NO.*

Gas installation pipework satisfactory visual inspection Yes/No
 Emergency Control Valve (ECV) accessible Yes/No
 Satisfactory gas tightness test Yes/No/NA
 Protective equipotential bonding satisfactory Yes/No

NEXT SAFETY CHECK DUE WITHIN 12 MONTHS

This Safety Record issued by: Signed [Signature]
 Print Name: JON CONSTABLE
 Received by: Signed _____
 Date appliance(s)/chimney(s) checked: 21/11/13
 Tenant/Landlord/Agent/Home Owner