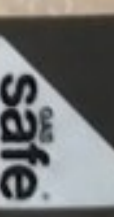


# LANDLORD / HOME OWNER GAS SAFETY RECORD

SERIAL NO

CP12 1019406



This form allows the recording of the results of the required checks as defined by the Gas Safety (Installation and Use) 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. The information recorded on this form does not confirm that the installation was installed by a person licensed by Gas Safe Register nor that the installation complies with any relevant Building Regulations. For appliances not owned by the Landlord, where only visual checks are undertaken, recording a YES in Appliance Safe is based only on a visual check for obvious defects with no physical tests completed.

### JOB ADDRESS

Rented Accommodation (Yes / No)  YES

Name: 9 Ewhurst Court  
 Address: Phildes Bridge Road  
Widmore  
 Postcode: CR24 3PL  
 Tel No: \_\_\_\_\_

### LANDLORD DETAILS

(or where appropriate their agent)

Name: C. J. Jeffery  
 Address: 13 Southey Road  
Chesham  
 Postcode: \_\_\_\_\_  
 Tel No: \_\_\_\_\_

### REGISTERED BUSINESS DETAILS

Reg No: GEOFF ELLIS 565092  
 Company: GLS SERVICES  
 Address: 7 BRAMLEY ROAD  
CHEAM, SURREY  
 SM2 7LR  
 MOB: 07976265748  
 EMAIL: GLS.SERVICES@YAHOO.CO.UK  
 Postcode: \_\_\_\_\_  
 Tel No: \_\_\_\_\_

### APPLIANCE DETAILS

Location	Appliance Type	Make	Model	Chimney/Flue Type (FL/OF/RS)	Landlord's Appliance (Yes/No/NA)	Appliance Checked (Yes/No)
1 <u>Living room</u>	<u>Boiler</u>	<u>Fedex</u>	<u>Logic Combi</u>	<u>RS</u>	<u>FL</u>	<u>Yes</u>
2 <u>Kitchen</u>	<u>Hob</u>	<u>Hotpoint</u>				<u>Yes</u>
3						
4						

No. of Appliances Listed Below 2

INSPECTION / SAFETY CHECKS			CHIMNEY CHECKS		COMBUSTION READING(S)		SUMMARY		AUDIBLE CO DETECTOR		
Ventilation Satisfactory (Yes/No)	Operating Pressure or Heat Input (mbar/kW)	Safety Device(s) Correct Operation (Yes/No)	Visual Condition Satisfactory (Yes/No/NA)	Chimney/Flue Performance (Pass/Fail/NA)	Initial (If Applicable)	Final (If Applicable)	Appliance Serviced (Yes/No)	Appliance Safe (Yes/No)	Correctly Installed (Yes/No/NA)	In Date (Yes/No/NA)	Test Satisfactory (Yes/No/NA)
1 <u>Yes</u>	<u>30.8kW</u>	<u>Yes</u>	<u>Yes</u>	<u>NA</u>	<u>0.0008</u>	<u>0.0008</u>	<u>No</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
2 <u>Yes</u>	<u>20mL</u>	<u>Yes</u>	<u>NA</u>	<u>NA</u>	<u>-</u>	<u>-</u>	<u>No</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
3											
4											

APPLIANCE DEFECT(S) IDENTIFIED \_\_\_\_\_ REMEDIAL ACTION TAKEN \_\_\_\_\_

### DETAILS OF OTHER WORK CARRIED OUT (e.g. service, etc.)

### OBSERVATIONS / COMMENTS / REMEDIAL WORK REQUIRED

NEXT SAFETY CHECK DUE BEFORE 07/09/24

### INSTALLATION GENERAL (Yes/No/NA)

Emergency Control Valve Satisfactory:  YES  
 Meter / Cylinder Installation Satisfactory (Visual):  YES  
 Main Protective Bonding Satisfactory (Visual):  YES  
 Gas Installation Pipework Satisfactory (Visual):  YES  
 Gas Installation Correct Materials Used (Visual):  YES  
 Gas Tightness Test Satisfactory:  YES

Issued by: G. Ellis Signed: [Signature]  
 Licence No: 565092 Issue Date: 04/09/23

Received by: \_\_\_\_\_ Signed: [Signature]  
 Print Name: [Name]

Tenant/ Home Owner / Landlord / Other (please state) \_\_\_\_\_  
 No one present at the time of visit