

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 29907

Registered Engineer's Name W Brooks

Gas Safe Register Licence Number 4788459

Business D. PRICE PLUMBING + HEATING

Address CILMERI, ABERCROMBIE
MERTHR TYDFIL

Postcode CF48 1YS

Contact No 07786106272

Details of Site

Name (Mr/Mrs/Miss/Ms) D. WATKINS

Address 101 BRITHDIR ST.
CATHAYS
CARDIFF

Postcode CF24 4LF

Contact No _____

Details of Landlord/Homeowner (or agent where appropriate)

Name (Mr/Mrs/Miss/Ms) D. WATKINS

Address 9 CORLEW CLOSE
NOTTAGLE

Postcode CF36 3QB

Contact No 07977906186

Number of Appliances tested: 1

Appliance Details							
	Location of	Type	Manufacturer	Model	Owned by Landlord / Homeowner Yes/No	Inspected Yes/No	Type of flue
1	KITCHEN	COMBI	FERROLI	MODENA 80	Y	Y	RSE
2							
3							
4							

Inspection Details								
	Operating pressure in mbar and/or heat input kW/h or Btu/h	Operation of safety device(s) Pass/Fail/NA	Ventilation satisfactory Yes/No	Visual condition of flue and termination Pass/Fail/NA	Flue operation checks Pass/Fail/NA	Combustion analyser reading (if applicable)	Serviced Yes/No	SAFE TO USE Yes/No
1	20mbar	P	Y	P	P	-	N	YES
2								
3								
4								

Any Defects Identified		GIUSP classification eg. NCS, AR, ID	Warning/Advice Record insert form serial No*
1			
2			
3			
4			

Remedial Action Taken numbering should correspond to defects above.

1 _____

2 _____

3 _____

4 _____

Details of Work carried out

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

Record issued by: Signature W Brooks

Print Name W. Brooks

Received by: Signature [Signature] Tenant/Landlord/Homeowner/Agent

Date appliance(s)/flue(s) checked 9-2-21

ATTENTION

Next safety check due by:

9-2-22