



Landlord Gas Safety Record

Cert. No. **North Somerset Gas Services Ltd**

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 | | Job Address | | Customer / Landlord | |
|---------------------|---------------------------------|-------------|-------------|---------------------|---------------------|
| Engineer | Martin Williams | Name | | Name | Mr M Owen |
| Company | North Somerset Gas Services Ltd | Address | 3 | Company | Mcgowan Investments |
| Address | 11 | | Colstondale | Address | Catherine House |
| | Embercourt Drive | | Bristol | | Harborough Road |
| | Backwell | | | | Northants |
| | Bristol | Post Code | | | |
| Post Code | BS48 3HU | Tel. No | | Post Code | NN6 9BX |
| Tel No. | 07944975650 | | | Tel. No | |
| Gas Safe Reg | 191360 | | | | |
| ID Card No. | 4461190 | | | | |

| 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 | Compartment | Boiler | Vaillant | Ecotec Plus 824 | RS | Yes | Yes | 22 | 19.78 | 0.0028 | 293 | 10.4 | 0.0021 | 220 | 10.4 | Yes | Yes | Yes | Pass | No | Yes |
| 2 | | | | | | | | | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | | | | | | | | | | |
| 6 | | | | | | | | | | | | | | | | | | | | | |

| Defects / Identified | | | | | Labels and Warning Notice Issued | | | CO Alarm(s) | | Smoke Alarm(s) | |
|----------------------|--|--|--|--|----------------------------------|--|--|-------------------------------------|------|--|----|
| 1 | | | | | | | | NA | | | |
| 2 | | | | | | | | CO Alarm(s) fitted | Yes | Smoke Alarm(s) fitted | NA |
| 3 | | | | | | | | CO Alarm(s) tested and Satisfactory | Pass | Smoke Alarm(s) tested and Satisfactory | NA |
| 4 | | | | | | | | | | | |
| 5 | | | | | | | | | | | |
| 6 | | | | | | | | | | | |

| | | |
|--|--|-------------------------------------|
| Emergency Control Accessible <input checked="" type="checkbox"/> Yes | Gas Tightness Satisfactory <input checked="" type="checkbox"/> Yes | Comments |
| Gas Installation Pipework Visual Inspection Satisfactory <input checked="" type="checkbox"/> Yes | | |
| Equipotential Bonding <input checked="" type="checkbox"/> Yes | | |
| NEXT INSPECTION DUE ON OR BEFORE <input type="text" value="12-Aug-2021"/> | | |

| Signatures | | Date | |
|---|--|--|--|
| Issued by: <input type="text" value="Signed"/> | | Received Signed by: <input type="text" value=""/> | <input type="text" value="07-Jul-2020"/> |
| Print Name <input type="text" value="Martin Williams"/> | | Print Name <input type="text" value="M Williams"/> | |