



# 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**

Engineer Martin Williams  
 Company North Somerset Gas Services Ltd  
 Address 11  
 Embercourt Drive  
 Backwell  
 Bristol  
 Post Code BS48 3HU  
 Tel No. 07944975650  
 Gas Safe Reg 191360  
 ID Card No. 5028837

**Job Address**

Name  
 Address 50  
 Trendlewood Park  
 Bristol  
 Post Code  
 Tel. No

**Customer / Landlord**

Name Mr M Owen  
 Company Mcgowan Investments  
 Address Catherine House  
 Harborough Road  
 Northants  
 Post Code NN6 9BX  
 Tel. No

**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	Ecomax 618/2E	RS	Yes	Visual	20	14	0.0005	51	9.4	0.0006	53	9.5	Yes	Yes	Yes	Pass	No	Yes
2																					
3																					
4																					
5																					
6																					

**Defects / Identified**

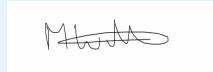
## Labels and Warning Notice Issued

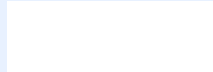
**CO Alarm(s)****Smoke Alarm(s)**

1																					
2																					
3																					
4																					
5																					
6																					

CO Alarm(s) fitted Yes Smoke Alarm(s) fitted NA  
 CO Alarm(s) tested and Satisfactory Pass Smoke Alarm(s) tested and Satisfactory NA

Emergency Control Accessible  Yes Gas Tightness Satisfactory  YesGas Installation Pipework Visual Inspection Satisfactory  YesEquipotential Bonding  Yes**NEXT INSPECTION DUE ON OR BEFORE** **Comments****Signatures**

Issued by: Signed   
 Print Name

Received Signed   
 Print Name

Date