Servicing & Safety Record Sheet for Solid Fuel Appliances (Landlord Safety Certificate)



This record is for safety & servicing purposes only. Ensure flues have been assessed visually and checked for satisfactory evacuation of products of combustion, and the appliance is not situated in close proximity to ignitable or combustible materials and meets manufacturer requirements. This report is valid for the day of assessment only.

Servicing Company					
Business Name: Test Contractor Engineer Number 12343823					
Operative Name: Test Engineer Operative Number: 015122187785					
Installation Details					

Installation Details					
Installation Location:	Kitchen				
Appliance Make/Model:	Test Make Test Model	Output:	1230 kW		
Ventilation Type:	Open	Size:	100 mm2		

Visual Checks					
Suitable hearth?	Yes	Ventilation Sufficient?	Yes		
Chimney Condition Sound?	Yes	CO Alarm FItted?	Yes		
Termination Height?	Yes	Information Available?	Yes		
Chimney Swept?	Yes	Clear of Combustibles?	Yes		
All Seals Airtight?	Yes	Controls Working?	Yes		
Custom	Yes				
Customer burning suitable/approved fuels for the appliance?			Yes		

	Defects Identified		Remedial Recommendations		
1	defect 1	this is the recommendation for defect 1			
2	defect 2	this is the recommendation for defect 2			
3	defect 3	this is the recommendation for defect 3			
4	4 defect 4		this is the recommendation for defect 4		
5	defect 5	this is the recommendation for defect 5			
	Warning Notice/Unsafe Situation Procedure Required?		Customer Aware of Remedial Works Required & Why?		

Additional Notes

Called gas

Property Details				
Customer Name:	Jane Lords			
	6th Floor 4 St. Pauls Square Liverpool Merseyside			
Postcode:	L39AG			
Email	test@test.com			

Re-Commissioning Checks					
RESULT NOTES					
Smoke Draw Test:	Pass	smoke draw tested			
Flue Draught Extraction Test: Pass		flue draught tested			
Spillage Test:	spillage tested				
General manufacturer checks undertaken? Yes					

Wet System Checks				
Boiler Connections & Suitability?	Yes	Storage Type, Size & Suitability?	Yes	
Storage Location?	Yes	F&E Tank Type, Location & Size?	Yes	
System Controls & Immersion?	Yes	System Checked under Operation?	Yes	
Service Passed?	Yes	Wet System Service Passed	Yes	

Servicing Record Sign Off						
Issued by:	Signed:		$\overline{}$			
	Print Name:	Test Engineer		Date:	2020-01-03	
Customer Confirmation:	Signed:					
	Print Name:	John Doe		Date:	2020-01-03	
Next Service Date:	2020-01-03		Service	d Passed?	Yes	