PLANT COMMISSIONING / SERVICING RECORD (NON-DOMESTIC)

Certificate Reference:

30461

DETAILS OF THE IN	ISTAI	LLAT)	ON	ADDI	RESS	5	DETAILS OF THE CLIENT ADDRESS		
Installation Birtley Nursi	ng Ho	me					Client Birtley Nursing Home		
Address: Bramley							Address: Bramley		
Guildford		Po	stcode	e: Gl	J5 0L	В		5 OLB	
APPLIANCE DETAILS				No. 1			Surrey No. 2 No. 3		
Location:	ocation:				r Roo	m	Boiler Room Boiler Roo	m	
Type:				Boiler 1			Boiler 2 Boiler 3		
Model:				RMG 100			RMG 100 RMG 10)	
Serial No:			2	2907681624/AU			2906676852/AU N/A		
Burner Manufacturer (if dif	ferent)):		Ŋ	N/A		N/A 2908686634	ł/AU	
Flue Type:				(OF		OF OF		
COMBUSTION CHEC	CKS		_ 0				SAFETY INFORMATION		
Appliance No		0.1		0.2		0.3	Has a Warning/Advice Notice been raised?	N/A	
Firing Mode	Low	High					Have warning labels been attached? If Wa	arning/Advice	
Heat input rating (kw)	na	109.5	na	109.5	na	109.5		isssued, inser I No above *	
Gas burner pressure (mbar)	na	9.3	na	9	na	9.1	GENERAL SAFETY CHECKS		
Gas rate (m3/hr)	na	na	na	na	na	na	Gas booster(s)/compressor(s) operating correctly?		
Air/gas ratio control setting	na	na	na	na	na	na	Gas installation tightness test carried out (if yes see separate form)?		
Ambient (room) temperature (C)	na	21.6	na	24.9	na	24.1	Gas installation pipework adequately supported?		
Flue gas temperature (C)	na	114.7	na	108.8	na	94.3	Gas installation pipework adequately supported: Gas installation pipework sleeved/labelled/painted as necessary?		
Flue gas temperature net (C)	na	na	na	na	na	na	Flue system installed in accordance with appropriate standards?		
Flue draught pressure (mbar)	na	na	na	na	na	na	Flue termination(s) satisfactory?		
Oxygen (o2) %	na	11.9	na	10.9	na	13.8	Fan-flue interlock operating correctly?	Yes N/A	
Carbon Monoxide (CO) ppm	na	19	na	26	na	2			
Carbon Dioxide (CO2) %	na	5.1	na	5.7	na	4.1	VENTILATION TYPE - Natural: 1 Mecha	and the same of th	
NO %	na	na	na	na	na	na	Plant room/compartment ventilation low-level free area (cm2)	1160	
Excess air %	na	na	na	na	na	na	high-level free area (cm2		
CO/CO2 - Ratio	na	0.000	na	0.000	na	0.000	Is ventilation satisfactory Yes/No? (If No see Details of remedial work) Yes	
Gross efficiency %	na	82.8	na	84.1	na	83.4	Mechanical ventilation flow rate inlet (m3/S)		
CO flue dilution ppm	na	na	na	na	na	na	extract (m3/S)		
ADDITIONAL CHEC	KS			No.1	No.2	No.3	Mechanical ventilation interlock operating correctly? Is ventilation satisfactory Yes/No? (If No see Details of remedial work	N/A N/A	
Flue flow test satisfactory?				Yes	Yes	Yes) IN/A	
Spillage test satisfactory?			***************************************	Yes	Yes	Yes	DETAILS OF WORK CARRIED OUT		
Ventilation satisfactory (see also General safety checks)?			:ks)?	Yes	Yes	Yes	Annual service carried out		
Air/gas pressure switch operating correctly?				N/A	N/A	N/A			
Flame proving/safety devices opera	ating cor	rectly?		Yes	Yes	Yes	DETAILS OF DEMERSOR WORK TO THE		
Burner lock-out time (seconds)?						5 sec	DETAILS OF REMEDIAL WORK REQUIR	ED	
Temperature and limit thermostats	operatin	ng correct	:ly?	Yes	Yes	Yes	N/A		
,	- F			100	1 (3	100			

DETAILS OF THE CONTRACTOR

Trading Title: Advanced Control Solutions Ltd

Ash Road, Pirbright

Surrey

Unit 7 Bakersgate Courtyard

Postcode: GU24 ONJ

Yes

Gas Safe Number:

189662

Gas ID Number:

4067523

Telephone Number:

01483 237812

I confirm that all of the above work described on this form has been satisfactorily completed in accordance with the current Gas Safety (Installation and Use) Regulations, industry standards and procedures.

Yes

Report Issued By:

Appliance serviced?

Name:

Chris Southby

Signature:

21/06/2018 Date:

Report Received By:

Name:

Signature:

Date:

Yes



GAS INSTALLATION SAFETY REPORT (NON-DOMESTIC)

Certificate Reference:

30461

DETAILS OF THE INSTALLATION ADDRESS

Installation Birtley Nursing Home

Address:

Bramley, Guildford, Surrey

DETAILS OF THE CLIENT ADDRESS

Client Birtley Nursing Home

Address: Bramley, Guildford, Surrey

Postcode: GU5 0LB Postcode:

GU5 OLB

APP	LIAN	ICE	DET	AILS

	I MARITON DESTRUCTIONS	<u>* </u>				
	Location	Appliance Type	Make	Model	Flue Type	Appliance Inspected
1	Boiler Room	Boiler 1	SIME	RMG 100	OF	Yes
2	Boiler Room	Boiler 2	SIME	RMG 100	OF	Yes
3	Boiler Room	Boiler 3	SIME	RMG 100	OF	Yes
4						

IN	SPECTIO	N DETAILS						AUDIB	LE CO	ALARM
	Combustion Analyser Reading	Operating Pressure in mbar or heat input in kW	Safety Devices(s) Correct Operation	Ventilation Provision Satisfactory	Visual Condition of Flue and Termination Satisfactory	Flue Performance Test	Appliance Safe To Use	Approved CO alarm fitted	Is CO alarm in date	Testing of CO alarm satisfactory
1	0.0004	109.5 kw	Yes	Yes	Yes	Pass	Yes	No	N/A	N/A
2	0.0005	109.5 kw	Yes	Yes	Yes	Pass	Yes	No	N/A	N/A
3	0.0000	109.5 kw	Yes	Yes	Yes	Pass	Yes	No	N/A	N/A
4										

METER	INST	ALLA	ION

Is the meter installation accessible	N/A
Is the meter room/compartment adequately ventilated	N/A
Is the meter room/compartment secure	N/A
Is the meter room/compartment clear of combustibles etc	N/A
Is the meter room/compartment lock key clearly labelled	N/A

INSTALLATION PIPEWORK

Is a gas installation line diagram fixed near the primary meter	N/A
primary meter	N/A
Is the gas installation line diagram current	N/A
Are adequate emergency/isolation valves fitted	YES
Are emergency/isolation valve handles in place and suitably labelled	YES
Is gas pipework colour coded/identified	YES
Is the gas installation electrically bonded	YES
Is pipework suitably sleeved and sealed as	YES
Has a gas strength/tightness test been carried out	YES
	Is the gas installation line diagram current Are adequate emergency/isolation valves fitted Are emergency/isolation valve handles in place and suitably labelled Is gas pipework colour coded/identified Is the gas installation electrically bonded Is pipework suitably sleeved and sealed as appropriate Has a gas strength/tightness test been

DETAILS OF WORK CARRIED OUT

Annual service carried out, gas tested in the boiler room only.

DETAILS OF REMEDIAL WORK REQUIRED

N/A

DETAILS OF THE CONTRACTOR

Trading Title: Advanced Control Solutions Ltd

Unit 7 Bakersgate Courtyard

Ash Road, Pirbright

Surrey

Gas Safe Number:

189662

Gas ID Number:

4067523

Telephone Number:

01483 237812

GU24 ONJ Postcode:

I confirm that this record is a true and accurate representation of the gas work carried out on the day of inspection.

Relevant and appropriate duty-holders are required to ensure that gas appliances, installation pipework and flues are maintained in a safe condition so as to prevent the risk of injury to any person.

Report Issued By:

Name:

Chris Southby

Signature:

Batho

Date:

21/06/2018

Report Received By: Name:

Signature:

MFulls

Date:

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GAS SAFETY RECORD CHECK LIST

GUIDANCE FOR RECIPIENT (to be appended to the Certificate)

- 1. Check with the occupant to ascertain any problems with the gas installation and appliance(s).
- 2. Check that there is an adequate supply of air to all gas appliances.
- 3. Check the operation of appliance, control taps, ignition system and any flame supervision devices fitted.
- 4. Check the flame picture of any burner(s).
- 5. Check clearances from combustible materials e.g. kitchen cupboards etc.
- 6. Check the stability of the appliance (including provision of bracket or hook and chain on gas cookers).
- 7. Check gas installation pipe work and where appropriate any flexible connection(s).
- 8. Open-flues
 - (a) Check the condition and full route (where practicable) of the flue and, where applicable, the suitability of any terminal/chimney pot fitted.
 - (b) Check the appliance flue connection to any chimney or flue-liner. In the case of a back boiler installation, check all pipe ducts or voids entering the builder's opening including the annular space around any flue liner/flue connection are sealed.
 - (c) Carry out flue flow check.
 - (d) For a gas fire, check and clear the catchment space and check that any dampers have been removed or fixed in the open position.
 - (e) Test the appliance for spillage using any guidance given in the manufacturer's instructions.
- 9. Room sealed appliances
 - (a) Check case and sight glass seal on appliance, replace as necessary.
 - (b) Check position of terminal, clearances from corners etc. vegetation and terminal guard fitted as appropriate.
- 10. Ensure the operating gas pressure or heat input rate or, where necessary, both are correct.
- 11. Test all controls to ensure satisfactory operation.
- 12. Test all disturbed gas connections for tightness using leak detection fluid, carry out full gas tightness test if required.
- 13. Advise the gas user of any defects/further work required or recommend as necessary.