GAS INSTALLATION SAFETY REPORT (NON-DOMESTIC)

Certificate Reference: 33636

DETAILS OF THE INSTALLATION ADDRESS

Address:

nstallation As Above

DETAILS OF THE CLIENT ADDRESS

Birtley House Nursing home

Address: Birtley House , Bramley, Guildford, Surrey

Postcode: Postcode: GU5 0LB

	APPLIANCE DETAILS							
	Location	Appliance Type	Make	Model	Flue Type	Appliance Inspected		
1	Main Plant Room	Boiler	SIME	RMG 100	OF	Yes		
2	Main Plant Room	Boiler	SIME	RMG 100	OF	Yes		
3	Main Plant Room	Boiler	SIME	RMG 100	OF	Yes		
4								

INSPECTION DETAILS								AUDIBLE CO		
	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	0.0005	109,50	Yes	Yes	Yes	Pass	Yes	No	No	No
2	0.0009	109,50	Yes	Yes	Yes	Pass	Yes	No	No	No
3	0.0000	109,50	Yes	Yes	Yes	Pass	Yes	No	No	No
4										

METER INSTALLATION		INSTALLATION PIPEWORK	
the meter installation accessible		s a gas installation line diagram fixed near the primary meter	YES
Is the meter room/compartment adequately ventilated	YES	Is the gas installation line diagram current	YES
Is the meter room/compartment secure	YES	Are adequate emergency/isolation valves fitted	YES
Is the meter room/compartment clear of combustibles etc		Are emergency/isolation valve handles in place and suitably labelled	YES
Is the meter room/compartment lock key clearly labelled	YES	Is gas pipework colour coded/identified	YES
		Is the gas installation electrically bonded	YES
	Is pipework suitably sleeved and sealed as appropriate	YES	
	Has a gas strength/tightness test been carried out	YES	

DETAILS OF WORK CARRIED OUT

DETAILS OF REMEDIAL WORK REQUIRED

DETAILS OF THE CONTRACTOR

rading Title: Advanced Control Solutions Ltd

Unit 7 Bakersgate Courtyard

Ash Road Pirbright

Postcode: GU240NJ

Gas Safe Number: 189662

Gas ID Number: 4455921

Telephone Number: 01483 237812

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: Bryan Yates Signature: Date: 07/06/2019

Report Received By: Name: Tim Signature: Date: 07/06/2019

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.

PLANT COMMISSIONING / SERVICING RECORD (NON-DOMESTIC)

Certificate Reference: 33636

DETAILS OF THE INSTALLATION ADDRESS DETAILS OF THE CLIENT ADDRESS nstallation As Client Client Birtley House Nursing home Address: Address: Birtley House Bramley, Guildford Postcode: Postcode: GU5 OLB Surrey No. 2 APPLIANCE DETAILS No. 1 No. 3 Location: Main Plant Room Main Plant Room Main Plant Room Type: Boiler Boiler Boiler Model: **RMG 100 RMG 100 RMG 100** Serial No: 2908686634/AU 2906676852/AU SIMF Burner Manufacturer (if different): SIME SIME 2907681624/AU Flue Type: OF OF OF COMBUSTION CHECKS SAFETY INFORMATION Appliance No No.1 No.2 No.3 Has a Warning/Advice Notice been raised? No No Low High Low High Low High Firing Mode If Warning/Advice Have warning labels been attached? Notice isssued, insert Serial No above * Heat input rating (kw) 109.5 109.5 109.5 109.5 _ Has responsible person been advised? No Gas burner pressure (mbar) GENERAL SAFETY CHECKS Gas rate (m3/hr) _ _ _ _ _ N/A Gas booster(s)/compressor(s) operating correctly? Air/gas ratio control setting Gas installation tightness test carried out (if yes see separate form)? Yes Ambient (room) temperature (C) 25.3 26.4 27.1 Gas installation pipework adequately supported? Yes Flue gas temperature (C) 128.3 109.2 108.8 _ _ Gas installation pipework sleeved/labelled/painted as necessary? Yes Flue gas temperature net (C) Flue system installed in accordance with appropriate standards? Yes Flue draught pressure (mbar) Flue termination(s) satisfactory? Yes 10.9 Oxygen (o2) % 14.0 14.3 _ Fan-flue interlock operating correctly? N/A 29 Carbon Monoxide (CO) ppm 34 1 VENTILATION TYPE - Natural: 1 3.97 Carbon Dioxide (CO2) % 5.75 3.81 _ 1. Plant room/compartment ventilation 1650 low-level free area (cm2) NO % 1650 high-level free area (cm2) Excess air % Is ventilation satisfactory Yes/No? (If No see Details of remedial work) Yes CO/CO2 - Ratio 0.000 0.000 0.000 _ _ -2. Mechanical ventilation flow rate N/Ainlet (m3/S) Gross efficiency % 82.0 82.8 81.8 N/Aextract (m3/S) CO flue dilution ppm Mechanical ventilation interlock operating correctly? N/A ADDITIONAL CHECK No.1 No.2 No.3 Is ventilation satisfactory Yes/No? (If No see Details of remedial work) N/A Flue flow test satisfactory? Yes Yes Yes DETAILS OF WORK CARRIED OUT Spillage test satisfactory? Yes Yes Yes Ventilation satisfactory (see also General safety checks)? Yes Yes Yes Air/gas pressure switch operating correctly? N/A N/A N/A Flame proving/safety devices operating correctly? Yes Yes Yes DETAILS OF REMEDIAL WORK REQUIRED 2 Burner lock-out time (seconds)? 1 1 Temperature and limit thermostats operating correctly? Yes Yes Yes Appliance serviced? Yes Yes Yes DETAILS OF THE CONTRACTOR rrading Title: Advanced Control Solutions Ltd 189662 Gas Safe Number: Unit 7 Bakersgate Courtyard Gas ID Number: 4455921 Ash Road **Pirbriaht** Telephone Number: 01483 237812 GU240NJ Postcode: 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. Bryan Yates 07/06/2019 Report Issued By: Date: Name: Signature: Report Received By: Name: Tim Signature: Date: 07/06/2019