Next safety check due by:

LANDLORD/HOMEOWNER GAS SAFETY RECORD

Company/Engineer		Appliance Details									
Company Name								Owno	d by		
Gas Safe Register No		Location of	Туре	Manufacturer		Model		Owned by Landlord/Homemaker		Inspected	Type of flue
Registered Engineer's Name	_							Landiaria			
Gas Safe Register License No	_ 1										
	_ 2										
Address	$-\begin{vmatrix} 3\\4 \end{vmatrix}$										
	_ 💾										
	Inspection Details										
Postcode							Combustion				
Contact No		Operating	Operation		Visual condition		analyser		00.41	CO Alarm	
Email Address	_	pressure in mbar and/or heat input	of safety	Ventilation satisfactory	of flue and	Flue operation checks	reading	Appliance serviced	CO Alarm	tested	SAFE TO USE
Into Antonia a		kW/h Btu/h	device(s)	Salisiaciory	termination	CHECKS		Serviceu	iiileu	(if fitted)	USE
Job Address							(If applicable)				
Address	_ _1										
	_ 2										
	_ <u>3</u>										
Postcode	_ _4_										
		Defect(s) Identified GIUSP classification Warning/F								Warning/Adviso	ory Record inse
Name	De	elect(s) luelitilleu					Gio	or classificat	.1011	form serial No*	
Contact No	_ 1										
Email Address		2									
	3_										
Customer/Landlord (or agent where appropriate)	4										
Name	_ Re	Remedial Action Taken numbering should correspond to defects above.									
Company	_ 1										
Address	_ 2										
	_ 3										
	_ 4	tails of Work car	wied out								
Postcode	_ []	etails of Work car	rried out				<u> </u>		<u> </u>		
Postcode	-										
Contact No		nalyser Readings	High / Init	ial Ratio Hi	gh/ Initial CO2 %	High/ initial co pr	om Low/ fina	al Ratio	Low/final	co2 % Lou	/ final CO ppm
Email Address		ppliance 1	riigir/ iiiid	iai ratio - i ii	917 11111111 002 70	Tilgili lilital co pi	ZOW/ IIIIC	ai i tatio	LOW/IIIIai	1002 /0 LOW	ililai CO ppii
		ppliance 2	_			_					
Number of Appliances tested		ppliance 2									
	$\neg \mid \overrightarrow{A}$	ppliance 4				-					
	*Ref	er to separate Warning/	Advisory Record	'							
Outcome of gas installation pipework visual inspection?		Sign	ature - Issue	ed by:						ATTE	NTION

Signature - Received by:

Date:

Outcome of gas supply pipework visual inspection?

Outcome of gas tightness test?

Is the Emergency Control Valve access satisfactory?

Is the Protective Equipotential bonding satisfactory?