

MAINTENANCE / SERVICE CHECKLIST

Inspection Address	Registered Business Details
Name	Reg No
Address	Gas Engineer
	Gas Safe Registered Engineer No
	Company
	Address
Post Code	
	Post Code

Rented Accommodation	Date & Time of Issue
Work Description	Engineers Signature

Appliance Details	Comments
Make	
Type	
Model	
Location	

Appliance Checks	Yes	No	N/A	Defect Found / Remedial Action Taken
Heat Exchanger				
Burner / Injectors				
Flame Picture				
Ignition				
Electrics				
Controls				
Leaks gas / eater				
Gas connections				
Seals				
Pipework				
Fans				
Fireplace				
Closure plate & PRS10 tape				
Allowable location				
Stability				
Return air / Plenum				

Safety Checks	Yes	No	N/A	Defect Found / Remedial Action Taken
Ventilation				
Flue Termination				
Smoke pellet flue flow test				
Smoke match flue flow test				
Working pressure				
Safety device				
Other (regulations etc)				
Gas tightness test performed				Pass or Fail

Findings	Yes	No
Is the installation and appliance safe to use?		
If No gas warning notice been rased and warning labels or stickers attahed?		
Has the installation been carried out to the relevant standard / manufacturers instructions?		

Necessary remedial work required: (See findings overleaf)	

Customer Signature	Print Name	Date
Engineers Signature	Print Name	Date