

# LANDLORD/HOME OWNER GAS SAFETY RECORD

Safety Inspection and reporting carried out in accordance with the Gas Safety (Installation and Use) Regulations 1998.

Certificate Reference:  

DETAILS OF THE CONTRACTOR	DETAILS OF THE INSTALLATION	DETAILS OF THE CLIENT/LANDLORD
Trading Title: Priority Home Service Limited	Installation: Rented	Client: West One Accomodation (West One)
Address: Unit 4, Neepsend Triangle 1 Burton Road Sheffield	Address: 236 School Road Sheffield	Address: 14 Fitzwilliam Street Sheffield
Post Code: S3 8BW	Post Code: S10 1GP	Post Code: S1 4JL
Gas Safe No: 539093      Telephone No: 0330 9991999	Telephone No: N/A	Telephone No: 01142722400

APPLIANCE DETAILS								
	Location	Appliance Type	Make	Model	Flue Type	Landlord's Appliance	Appliance Inspected	
1	Kitchen	Chb	Worcester	Greenstar 30 si 4731185	RS	Yes	Yes	
2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
3	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
4	N/A	N/A	N/A	N/A	N/A	N/A	N/A	

INSPECTION DETAILS									AUDIBLE 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 Serviced	Appliance Safe To Use	CO alarm fitted	Is CO alarm in date	Testing of CO alarm satisfactory
1	0007,9.63,72	30.90kw	Yes	Yes	Yes	N/A	Yes	Yes	No	N/A	N/A
2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
3	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
4	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

DEFECT(S) IDENTIFIED	REMEDIAL ACTION TAKEN	NOTICE & LABEL ISSUED
1 N/A	N/A	N/A
2 N/A	N/A	N/A
3 N/A	N/A	N/A
4 N/A	N/A	N/A

Outcome of gas installation pipework visual inspection	<b>PASS</b>	Is the Emergency Control Valve access satisfactory	<b>YES</b>	Outcome of gas tightness test	<b>PASS</b>
Outcome of gas supply pipework visual inspection	<b>PASS</b>	Is the Protective Equipotential bonding satisfactory	<b>YES</b>	NEXT INSPECTION DUE ON OR BEFORE:	<b>11/09/2020</b>

SIGNATURES					
Report Issued By: Name:	Rich Baker	Signed:		Date Inspected:	11/09/2019
Report Received By: Name:		Signed:		Date Received:	