

Mr/Ms/Miss (Gas User)	Mr/Ms/Miss (Gas User)
Address Marston in Marsh Council Offices High Street Marston	LANDLORD/AGENT Cheltenham District Council
Postcode	Address Trinity Rd Cirencester Glos
Home Tel No.	Engineer's Corgi Reg. No. 3330453
Work Tel No.	Date of issue 17/7/14
	Time of issue 12:00
	Issued by D. Page
	Print name D PAGE
	Job No. SW



WORK CARRIED OUT

LANDLORD'S GAS SAFETY RECORD (1998 REGULATIONS)

GAS APPLIANCE SERVICE & SAFETY CHECK

GAS SAFETY WARNING NOTICE ISSUED

CORGI REGISTRATION NUMBER 11724

APPLIANCE NUMBER	APPLIANCE DETAILS				FLUE TYPE	OPERATING GAS PRESSURE M/BAR.	SAFETY DEVICE CORRECT OPERATION YES/NO	VENTILATION SATISFACTORY YES/NO	VISUAL CONDITION OF FLUE PASS/FAIL	FLUE PERFORMANCE CHECK		APPLIANCE SAFE TO USE IF NO SEE WARNING NOTICE YES/NO	WARNING LABEL ATTACHED YES/NO
	ROOM LOCATION	TYPE (ie cooker)	MAKE	MODEL						FLUE FLOW TEST PASS/FAIL	SPILLAGE TEST PASS/FAIL		
1	Plant	Boiler	Hamworthy	Hamworth	O	20.0	YES	YES	PASS	N/A	N/A	YES	NO
2	Plant	Boiler	Hamworthy	Hamworth	O	20.0	YES	YES	PASS	N/A	N/A	YES	NO
3													
4													

COMMENTS - FAULTS - RECTIFICATION WORK REQUIRED

Gas installation soundness test **PASS** **FAIL**

THIS WARNING NOTICE CONCERNS YOUR SAFETY
Issued in Accordance with The Gas Safety (Installation & Use) (Amendment) (No 2) Regulations 1998

ENTER APPLIANCE NUMBER

APPLIANCE/INSTALLATION DANGEROUS DO NOT USE DUE TO

APPLIANCE/INSTALLATION AT RISK UNSAFE TO USE DUE TO

Signed _____ Date _____

RECEIVED ON BEHALF OF TENANT / LANDLORD

I CONFIRM THAT I UNDERSTAND THAT THE USE OF THE INSTALLATION COULD PRESENT A HAZARD AND COULD PLACE ME IN BREACH OF THE GAS SAFETY (INSTALLATION & USE) (AMENDMENT) (NO 2) REGULATIONS 1998

IF NOT APPLICABLE TICK BOX

Signed _____ Date _____

TENANT / LANDLORD

To comply with the Gas Safety Regulation the following action has been taken

The appliance is dangerous and capped off with users/owner permission

Appliances/installation has been turned off and labelled as unsafe to use.

The gas user has been advised and the appliance/installation left connected.

The gas user was not available and this Notice has been left on the premises.

GAS ESCAPE has been detected on the installation and the supply has been turned off.

This inspection is for gas safety purposes only in accordance with Gas Safety (Installation and Use) Regulations. Flues were inspected visually and checked for satisfactory removal of products of combustion. A detailed internal inspection of the flue condition, construction and lining has not been carried out.



GAS SAFETY INSPECTION

This form is not to be used as a Landlord's Gas Safety Record and the details recorded below do not confirm that the installation was installed by a Registered Installer or that the installation complies with Building Regulations.

Job No:
 Invoice no:

Registered Business Details (REG NO)
 Company Booth + Bonford Ltd
 Gas Operative Licence No. 3330453
 Address Unit 2 Mead Rd
Cheltenham Glos
 Postcode GL53 7EF Tel No. 588220

Job Address
 Name (Mr/Mrs/Miss/Ms) _____
 Address 33 Querna Road
Cirencester.
 Postcode _____ Tel No. _____
 Rented accommodation state Yes or No

Gas Installation

	Yes/No	DETAILS
Is the installation gas tight?	<input checked="" type="checkbox"/>	<u>YES</u>
Have the correct materials been used in the installation?	<input checked="" type="checkbox"/>	<u>YES</u>
Is the installation pipework correctly sized?	<input checked="" type="checkbox"/>	<u>YES</u>
Where appropriate, has protective electrical bonding been carried out?	<input checked="" type="checkbox"/>	<u>YES</u>

Emergency Control(s)

	Yes/No	DETAILS
Is the emergency control valve(s) correctly positioned/accessible?	<input checked="" type="checkbox"/>	<u>YES</u>
Is the emergency control valve(s) labelled?	<input checked="" type="checkbox"/>	<u>YES</u>

Appliance Details

Type	Make	Model	Flue type OF/RS/FL	Chimney condition and termination satisfactory Yes/No/NA	Flue performance checks Pass/Fail/NA	Is ventilation satisfactory? Yes/No	Operating pressure in mbars or heat input kW or Btu/h	Combustion analyser reading (if applicable)	Appliance safe to use Yes/No
<u>Boiler</u>	<u> Worcester</u>	<u>Greenstar 28i junior</u>	<u>RS</u>	<u>YES</u>	<u>PASS</u>	<u>YES</u>	<u>19.5</u>	<u>YES</u>	<u>YES</u>
 									

Findings

Is the gas installation safe for use?	Yes/No		Yes/No
	<input checked="" type="checkbox"/>		<input type="checkbox"/>
If No, issue a Warning/Advice Notice (insert serial No.) <input style="width: 100px;" type="text"/>		Have warning labels been affixed?	<input type="checkbox"/>
		Is any remedial work required?	<input type="checkbox"/>

Details of remedial work required _____
Serviced as per manufacture - OK.

Heating pressure was down - now topped up to 1.4 bar OK.

Gas user signature _____	Gas operative signature <u>D Page</u>
Print name _____	Print name <u>D PAGE</u>
Date _____	Date <u>22/7/14</u>

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