

This inspection is for gas safety purposes only to comply with the Gas Safety (Installation and Use) Regulations. Flues have been inspected visually and checked for satisfactory evacuation of products of combustion. A detailed internal inspection of the flue integrity, construction and lining has NOT been carried out.

REGISTERED BUSINESS DETAILS Reg No:

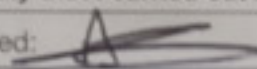
Gas Engineer: **A2B Plumbing, Heating & Gas Repairs Ltd**
 Gas Safe registered engineer No: **Amit Nanda**
 Company: **2 Cleveland Road**
Wigston, Leicester
LE18 1NF
 Address: **Reg: 304954**
Tel: 07947 409 231

Postcode: _____ Tel: _____

INSPECTION/INSTALLATION ADDRESS

Name & Title: _____
 Address: **7 Upton Street**
 Postcode: _____ Tel: _____

I certify that I carried out inspections on the appliances detailed below.

Signed:  Inspection Date: **19/12/17**

LANDLORD (OR AGENT) NAME & ADDRESS (if applicable)

Name & Title: _____
 Address: _____
 Postcode: _____ Tel: _____


	APPLIANCE DETAILS						FLUE TESTS				INSPECTION DETAILS						
	Location	Make and Model	Type	Flue Type OF/RS/FL	Operating pressure in mbar or heat input kWh or Btu/h	Safety device(s) correct operation Yes/No/NA	Spillage test Pass/Fail/NA	Smoke pellet flow test Pass/Fail/NA	Initial combustion analyser reading	Final combustion analyser reading	Satisfactory termination Yes/No/NA	Flue visual condition Pass/Fail/NA	Adequate ventilation Yes/No	Landlord's appliance Yes/No/NA	Inspected Yes/No	Appliance serviced Yes/No	Appliance Safe to Use Yes/No
1	Kirkton	Cooker	Hobs	KL	66	Yes	not	NA	NA	NA	NA	NA	Yes	Yes	Yes	NO	Yes
2	"	Popperston HE pump	Water	RS	210w	Yes	not	NA	NA	NA	Yes	Pass	Yes	Yes	NO	Yes	Yes
3																	
4																	
5																	

Gas Installation Pipework: Satisfactory Visual Inspection: Yes No Emergency Control Accessible: Yes No Satisfactory Gas Tightness Test: Yes No Equipotential Bonding Satisfactory: Yes No

	GIVE DETAILS OF ANY FAULTS	RECTIFICATION WORK CARRIED OUT	WARNING NOTICE ISSUED	WARNING TAG or STICKER FIXED
			Yes/No/NA	Yes/No/NA
1				
2				
3				
4				
5				

Audible CO Alarms: Approved CO Alarms Fitted: Yes No N/A Are CO Alarms in Date: Yes No N/A Testing of CO Alarms Satisfactory: Yes No N/A Smoke Alarms Fitted: Yes No N/A

Number of appliances tested: **2** **NEXT GAS SAFETY CHECK MUST BE CARRIED OUT WITHIN 12 MONTHS**

This record is issued by: Signed:  Print Name: **Amit Nanda** Date: **19/12/17**

Received on behalf of the Landlord/Home Owner: Signed: _____ Tenant/Agent/Landlord/Home Owner (Delete as applicable) Date: **19/12/17**