



## Domestic/Landlord Gas Safety Record

Safety inspection and reporting carried out in accordance with Gas Safety (Installation and Use) Regulations and the Gas Industry Unsafe Situations Procedure. Unless stated otherwise, no detailed internal inspection of flues (Integrity, Construction and Lining) has been carried out.

| Certificate Reference |
|-----------------------|
| 28 Granville          |

Certificate No: 1

| Engineers Details  |              |                                  |              |                |            |            |                    |                                       | Installation Details                          |   |                  |  | Client Details         |                                       |  |  |   |  |                                      |                                      |  |
|--|--------------|----------------------------------|--------------|----------------|------------|------------|--------------------|---------------------------------------|---|---|------------------|--|------------------------|---------------------------------------|--|--|---|--|--------------------------------------|--------------------------------------|--|
| Trading Title  |              | GW Plumbing and Heating          |              |                |            |            |                    |                                       | tallation                                     |   |                  |  |                        |                                       | Client   |  | Houses  |  |                                      |                                      |  |
| Address  |              | 7 Hertford Close                 |              |                |            |            |                    |                                       | dress   | 28  |                  |  |                        |                                       | Address  | 90   | 90  |  |                                      |                                      |  |
|  |              | Syston                           |              |                |            |            |                    |                                       |   | Granville Street                            |                  |  |                        |                                       |  | Page   | Paget Street  |  |                                      |                                      |  |
|  |              | Leicester                        |              |                |            |            |                    |                                       |   | Loughborough                                |                  |  |                        |                                       | Loughborough                                   |  |   |  |                                      |                                      |  |
|  |              | Post Code: LE7 2FA               |              |                |            |            |                    |                                       |   | Post Code: LE11 3BN                         |                  |  |                        |                                       |  |  | ı   | Post Cod                                   | de: LE115                            | DT                                   |  |
| One Out N  |              | 044162 Talanhana Na. 07799270040 |              |                |            |            |                    | ╡ .                                   | Talashara Na                                  |   |                  |  |                        |                                       | Tolophono No:                                  |  |   |  |                                      |                                      |  |
|  | Safe No:     | 944162 Telephone No: 07788379040 |              |                |            |            |                    | le                                    | Telephone No:                                 |   |                  |  |                        |                                       | Telephone No:                                  |  |   |  |                                      |                                      |  |
| Appliance Details  |              |                                  |              |                |            | T          | Inspection Details |                                       |   |   |                  |  | т т                    |                                       | _  |  |   |  |                                      |                                      |  |
|  | Locatio      | Location                         |              | Appliance Type |            | se         | Model              | Combustion LOW (CO2% or CO/CO2 ratio) | Combustion HIGH<br>(CO2% or CO/CO2 ratio)     | Heat Input (KW)<br>or<br>Operating Pressure | CO Reading (ppm) | Appliance<br>Inspected<br>(YES/NO/NA/VIO)<br>(VIO = Vieual Inspector Only) | FlueType<br>(OF/RS/FL) | Landlords<br>Appliance<br>(YES/NO/NA) | Safety Device(s) Correct Operation (YES/NO/NA) | Ventilation<br>Provision<br>Satisfactory<br>(YES/NO) | Visual Condition<br>Of Flue and<br>Termination<br>Satisfactory<br>(YES/NO/NA) | Flue Performance<br>Test<br>(PASS/FAIL/NA) | Appliance<br>Serviced<br>(YES/NO/NA) | Appliance<br>Safe To Use<br>(YES/NO) |  |
| 1  | Kitchen      |                                  | Combi boiler |                | Main       |            | Eco Elite 30 ERP   | 0.0002                                | 0.0007  | 29.2 kw                                     | 47PPM            | YES  | RS                     | YES                                   | YES  | YES  | YES   | PASS                                       | NO                                   | YES                                  |  |
| 2  | 2            |                                  |              |                |            |            |                    |                                       |   |   |                  |  |                        |                                       |  |  |   |  |                                      |                                      |  |
| 3  |              |                                  |              |                | 1          |            |                    |                                       |   |   |                  |  |                        |                                       |  |  |   |  |                                      |                                      |  |
| 4  |              |                                  |              |                |            |            |                    |                                       |   |   |                  |  |                        |                                       |  |  |   |  |                                      |                                      |  |
| 5  |              |                                  |              |                |            |            |                    |                                       |   |   |                  |  |                        |                                       |  |  |   |  |                                      |                                      |  |
| Faults/Notes   |              |                                  |              |                |            |            |                    | Remedial Work Taken                   |   |   |                  |  |                        |                                       |  |  | Warni   | ng Notic                                   | e Fixed                              |                                      |  |
| 1  |              |                                  |              |                |            |            |                    |                                       |   |   |                  |  |                        |                                       |  |  |   |  |                                      |                                      |  |
| 2  |              |                                  |              |                |            |            |                    |                                       |   |   |                  |  |                        |                                       |  |  |   |  |                                      |                                      |  |
| 3  |              |                                  |              |                |            |            |                    |                                       |   |   |                  |  |                        |                                       |  |  |   |  |                                      |                                      |  |
| 4  |              |                                  |              |                |            |            |                    |                                       |   |   |                  |  |                        |                                       |  |  |   |  |                                      |                                      |  |
| 5  |              |                                  |              |                |            |            |                    |                                       |   |   |                  |  |                        |                                       |  |  |   |  |                                      |                                      |  |
| Emergency Control Valve Accessible:  YES  Gas Tightness Satisfactory:  YES |              |                                  |              |                |            |            |                    |                                       | Signatures  Report Issued By:  Gas ID Number: |   |                  |  |                        |                                       |  |  |   | 5555519                                    |                                      |                                      |  |
| Gas Installation Pipework Visual Inspection Satisfactory:                  |              |                                  |              |                |            |            |                    |                                       | Name: Grant Wright Signed: Date:              |   |                  |  |                        |                                       |  |  | Fri-12-0  | Fri-12-07-2024                             |                                      |                                      |  |
| Number of Appliances Tested: 1 Equipotential Bonding: YES                  |              |                                  |              |                |            |            |                    |                                       | Report Received By:                           |   |                  |  |                        |                                       |  |  |   |  |                                      |                                      |  |
| NEXT INSPECTION DUE ON OR BEFORE:  Sat-12-07-2025 Installation Pass: YES   |              |                                  |              |                |            |            | ٦                  | ame:                                  | Signed: Date:                                 |   |                  |  |                        |                                       |  | Fri-12-07-2024                                       |   |  |                                      |                                      |  |
| CO A   | arm fitted a | & working                        | а? Г         | YES Sr         | noke alarr | n fitted 8 | & working? YES     | 7                                     |   |   | This Gas Sa      | fety Report w  | as created h           | / Gas Checker S                       | oftware all rights r                           | reserved ww  | vw gaschecker co  | uk   |                                      |                                      |  |