



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.
This safety check complies with (but is not limited to) Regulation 26(9) of GSIUR.

Certificate Reference

21 Barchester 2025

Certificate No:

Engineers Details

Trading Title

Address

Post Code: UB77QB

Gas Safe No:

Telephone No:

Installation Details

Installation Address

Post Code: UB8 2JY

Telephone No:

Client Details

Client Address

Post Code: UB8 2JY

Telephone No:

Appliance Details

	Location	Appliance Type	Make	Model	Combustion LOW (CO2% or CO/CO2 ratio)	Combustion HIGH (CO2% or CO/CO2 ratio)	Heat Input or Operating Pressure (Mbar)	CO Reading (ppm)	Appliance Inspected (YES/NO/NA/0) <small>(0/0 is final inspection only)</small>	Flue Type (OF/RS/FL)	Landlords Appliance (YES/NO/NA)	Safety Device(s) Correct Operation (YES/NO/NA)	Ventilation Provision Satisfactory (YES/NO/NA)	Visual Condition Of Flue and Termination Satisfactory (YES/NO/NA)	Flue Performance Test (PASS/FAIL/NA)	Appliance Serviced (YES/NO/NA)	Appliance Safe To Use (YES/NO)
1	Kitchen	Central heating boiler	Worcester Bosch	18 Ri	9.2	9.8	19mb	61	YES	RS	YES	YES	YES	YES	PASS	YES	YES
2																	
3																	
4																	
5																	

Faults/Notes

Remedial Work Taken

Warning Notice Fixed

1		
2		
3		
4		
5		

Emergency Control Valve
Accessible:

Gas Tightness Satisfactory:

Signatures

Gas ID Number:

Gas Installation Pipework Visual Inspection Satisfactory:

Number of Appliances Tested:

Equipotential Bonding:

NEXT INSPECTION DUE ON
OR BEFORE:

Installation Pass:

CO Alarm fitted & working?

Smoke alarm fitted & working?

Report Issued By:

Name:

Signed:

Date:

Report Received By:

Name:

Signed:

Date: