

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: 110495

Gas Engineer: MICHAEL SPURROE

Gas Safe registered engineer No: 3844783

Company: ALAN RINGGTON & SON

Address: 81 MORRISON STREET GDLS

Postcode: Tel:

**INSPECTION/INSTALLATION ADDRESS**

Name & Title:

Address: 101 BRUNSFIELD PLACE

Postcode: CH10 4GB

Tel:

Rented: Yes: ☒ No: ☐

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

Name & Title: JAMES MARR

Address: 7 FURNHAM PLACE

Postcode: Tel:

**DESCRIPTION OF WORK CARRIED OUT**

GAS SAFETY CHECK

| APPLIANCE DETAILS |          |                   |      |                       | FLUE TESTS                                                         |                                                          |                                  |                                                   | INSPECTION DETAILS                           |                                            |                                          |                                          |                                   |                                      |                     |                                 |                                    |
|-------------------|----------|-------------------|------|-----------------------|--------------------------------------------------------------------|----------------------------------------------------------|----------------------------------|---------------------------------------------------|----------------------------------------------|--------------------------------------------|------------------------------------------|------------------------------------------|-----------------------------------|--------------------------------------|---------------------|---------------------------------|------------------------------------|
|                   | Location | Make and Model    | Type | Flue Type<br>OF/RS/FL | Operating<br>pressure in<br>mbar or<br>heat input<br>kW/h or Btu/h | Safety<br>device(s)<br>correct<br>operation<br>Yes/No/NA | Spillage<br>test<br>Pass/Fail/NA | Smoke<br>pellet flue<br>flow test<br>Pass/Fail/NA | Initial<br>combustion<br>analyser<br>reading | Final<br>combustion<br>analyser<br>reading | Satisfactory<br>termination<br>Yes/No/NA | Flue visual<br>condition<br>Pass/Fail/NA | Adequate<br>ventilation<br>Yes/No | Landlord's<br>appliance<br>Yes/No/NA | Inspected<br>Yes/No | Appliance<br>serviced<br>Yes/No | Appliance<br>Safe to Use<br>Yes/No |
| 1                 | KITCHEN  | SIME PRESTOL 1000 | COMP | RS                    | 20                                                                 | YES                                                      | NA                               | NA                                                | 6.0005                                       | 6.0008                                     | YES                                      | NA                                       | YES                               | YES                                  | YES                 | NO                              | YES                                |
| 2                 |          |                   |      |                       |                                                                    |                                                          |                                  |                                                   |                                              |                                            |                                          |                                          |                                   |                                      |                     |                                 |                                    |
| 3                 |          |                   |      |                       |                                                                    |                                                          |                                  |                                                   |                                              |                                            |                                          |                                          |                                   |                                      |                     |                                 |                                    |
| 4                 |          |                   |      |                       |                                                                    |                                                          |                                  |                                                   |                                              |                                            |                                          |                                          |                                   |                                      |                     |                                 |                                    |
| 5                 |          |                   |      |                       |                                                                    |                                                          |                                  |                                                   |                                              |                                            |                                          |                                          |                                   |                                      |                     |                                 |                                    |

Gas Installation 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**

|   |                                     |                                        |
|---|-------------------------------------|----------------------------------------|
| 1 | INCORRECT EMERGENCY NUMBER AT METER | PHONED MURDO WORK SHOWN BY RE-THREADED |
| 2 | NO BATTERY BONDING AT METER         |                                        |
| 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: 1

**NEXT GAS SAFETY CHECK MUST BE CARRIED OUT WITHIN 12 MONTHS**

This record is issued by:

Signed:

Print Name:

MICHAEL SPURROE

Date:

24/10/16

Received on behalf of the Landlord/Home Owner: Signed:

Signed:

Tenant/Agent/Landlord/Home Owner (delete as applicable)

Date:

24/10/16