LANDLORD/HOME OWNER GAS SAFETY RECORD

Report Ref No. 45C 0956201

This inspection is for gas safety purposes only to mply with the Gas Safety (Installation and Use) Regulations. Flues have been inspected visually and checked

OTHER COMMENTS OR OBSERVATIONS	2 3 4 Audible CO Approved CO Yes No N/A Alarms: Alarms Fitted: Yes No N/A	Gas Installation Satisfactory Visual Yes No Sippework: Give Details of Any	1 KITCHEN IDEAL ATIANIC 2 KITCHEN INDEST	REGISTERED BUSINESS DETAILS REGISTERED BUSINESS DETAILS Reg No: 621668 Company: 70HT Address: 68 MELACSE AVENUE Postcode: Suit HQY Tel:
NEXT GAS SAFETY CHECK DUE BEFORE: 25104123 Received By: Signed:	Are CO Alarms in Date: Yes No N/A Alarms Satisfactory:	For appliances not owned by the landlord the recorded 'Appliance Safe to Use' response is based on a satisfactory Visual Yes No Emergency Control Yes No Satisfactory Gas Tightness Test: Yes GIVE DETAILS OF ANY FAULTS RECTIFICATION WOL	Type Flue Type pressure in device(s) Spillage Pollet flue Combustion Correct lest low test analyser reading PassFailNNA PassFa	STERED BUSINESS DETAILS No: 621668 Name 8 Title: PLNS PLOPELTICS LTD Address: 12 GALPINS PLOPELTICS THORNTON HEATH Postcode: CL767A Tel: Number of appliances tested: 2
ISSUED BY (GAS ENGINEER) DTAFEL Signed: Signed: Signed: 15 / 0 4 / 2 2 RECEIVED BY (Colore as applicable) Tenant/Agent/Landlord/Home Owner at time of visit Print Name:	Yes No N/A Smoke Alarms Fitted: Yes No N/A	atisfactory Gas yes No Equipotential Bonding Satisfactory: Yes No NARNING TAG OR NOTICE ISSUED NO LABEL FIXED OUT REQUIPOTED OUT NOTICE ISSUED NO NARNING TAG OR NOTICE ISSUED NOTICE	Satisfactory Flue visual Addition on termination condition visual and visual addition of the visual addition of th	LANDLORD (OR AGENT) NAME & ADDRESS (if applicable) Name & Inte: RLNS PROPERTIES LTD Address: Postcode: Tel: Number of appliances tested: 2

Copies:

White - Landlord/Agent/Home Owner Green - Engineer Pink - Tenant (if rented)

BF452112

★ IF YES, PLEASE REFER TO SEPARATE WARNING NOTICE - DANGER DO NOT USE REPORT PAD

Form Ref. REGP45