



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

12 Granville St

Certificate No: 01

Engineers Details

Trading Title: Scott Mee Plumbing Heating And Gas Services

Address: 9 Kirkstone Ave, Heanor, Derbyshire
Post Code: De757uj

Gas Safe No: 670139 Telephone No: 07576807489

Installation Details

Installation Address: 12 Granville St, LoLoughborough
Post Code: LE113BN

Telephone No: []

Client Details

Client Address: Parrhouses, 90 Paget St, Loughborough
Post Code: LE11 5DT

Telephone No: 01509 238838

Appliance Details

Inspection Details

| | Location | Appliance Type | Make | Model | CO2 Reading (%) | CO Reading (ppm) | Flue Type (OF/RS/FL) | Appliance Inspected (YES/NO/NA/IO) (IO = Visual Inspection Only) | Combustion Analysis Reading (CO/CO2) | Landlords Appliance (YES/NO/NA) | Operating Pressure(mbar) or Heat Input(KW) | Safety Device(s) Correct Operation (YES/NO/NA) | Ventilation Provision Satisfactory (YES/NO) | 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 | Combi Boiler | Main | Main | 8.9 | 33 | RS | YES | 0.0003 | YES | 19.03 mbar | YES | NA | YES | PASS | NA | YES |
| 2 | | | | | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | | | | | | |

Faults/Notes

Remedial Work Taken

Warning Notice Fixed

| | | | |
|---|--|----------------------------|----|
| 1 | | Recharged expansion vessel | NA |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |

Emergency Control Valve Accessible: Yes No

Gas Tightness Satisfactory: YES No

Gas Installation Pipework Visual Inspection Satisfactory: Yes No

Number of Appliances Tested: Equipmental Bonding: Yes No

NEXT INSPECTION DUE ON OR BEFORE: Installation Pass: Yes No

CO Alarm fitted & working? YES No Smoke alarm fitted & working? YES No

Signatures

Report Issued By:

Name: Scott Mee

Signed: SMee

Date: Mon-10-Jul-2023

Report Received By:

Name: Scott Mee

Signed: SMee

Date: Mon-10-Jul-2023

Gas ID Number: 5369108