

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: **575277**  
 Company: **Home Services PAH Services**  
 Address: **8 NURSING RD**  
**HULL LD**  
 Postcode: **YO10 3AB**  
 Tel: **0774 250595**

**INSPECTION/INSTALLATION ADDRESS**

Name & Title:  
 Address: **60A WAINGATE**  
**FIRST FLOOR FLATS**  
 Postcode: **YO19 7TS** Tel:

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

Name & Title: **BABBARA JACKSON**  
 Address: **103 THE VILLAGE**  
**STEETON ON THE COLLS**  
 Postcode: **YO32 9QP** Tel:

**APPLIANCE DETAILS**

Location	Make and Model	Type	Flue Type OF/RS/FL	Operating pressure in meter or meter input kWh or Btu/h	Safety device(s) correct operation Yes/No/NA	Spillage test Pass/Fail/NA	Smoke point test Pass/Fail/NA	Initial combustion analyser reading	Final combustion analyser reading	Satisfactory termination Yes/No/NA	Flue visual condition Pass/Fail/NA	Adequate ventilation Yes/No	Landlord's appliance Yes/No/NA	Inspected Yes/No	Appliance Visual Check Yes/No	Appliance serviced Yes/No	Appliance Safe to Use Yes/No
1	CUPBOARD	IDEAL COSE	RS	19	YES	—	—	—	—	YES	PASS	YES	YES	YES	YES	YES	YES
2	KITCHEN	MARPELLER MS649D	COSE OF	21	YES	—	—	—	—	PASS	NA	YES	YES	YES	YES	NO	YES
3		MIND	PPM	5.2	—	—	—	8.4	—	RATIO	0.0006	—	—	—	—	—	—
4		MAX	PPM	6.7	—	—	—	8.6	—	RATIO	0.0007	—	—	—	—	—	—
5				20.9	—	—	—	—	—	—	—	—	—	—	—	—	—

For appliances not owned by the landlord the recorded 'Appliance Safe to Use' response is based on a visual check for obvious defects only

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**

1																	
2																	
3																	
4																	
5																	


**RECTIFICATION WORK CARRIED OUT**

**OTHER COMMENTS OR OBSERVATIONS**

Audible CO Alarms Fitted: Yes  No  N/A   
 Approved CO Alarms Fitted: Yes  No  N/A   
 Ate CO Alarms in Date: Yes  No  N/A

**NEXT GAS SAFETY CHECK DUE BEFORE:**  
**18 10 1 123**

**ISSUED BY (GAS ENGINEER)**

Print Name: **SAMIE THACKOLDY** Signed:   
 Licence No: **575277** Issue Date: **18/10/122**  
 Received By: **BARBARA JACKSON** (Date as applicable)  
 Signed: **BARBARA JACKSON** Tenant/Agent/Landlord/Home Owner  
 Print Name: \_\_\_\_\_  
 No one present at time of visit

**RECEIVED BY**