

	LANDLORD HOME / OWNER GAS SAFETY RECORD This form allows the recording of the results of the required checks as defined by the Gas Safety (Installation and Use) Regulations.															RECORD NUMBER				
Chim	nove/flux		recorded on the	form does not cor	nfirm that the installation	n was installed b	required checks as defined by the Gas Safety (Installation and Use) Regulations. as installed by a registered installer or that the installation complies with any relevant Building Regulations. of combustion. A detailed internal inspection of the chimney/flue integrity, construction and lining has not been carried out.									ST198CHL-G				
REGISTERED BUSINESS DETAILS							INSTALLATION ADDRESS				, , ,			ANDLORD NAME AND ADDRESS (if different)						
Company: STAR ELECTRICAL & HEATING SERVICES							ame & Title: Tenant Occupier Name & Title:									· · ·				
Address:						Address:		198 CHAWELL HEATH LANE Address: ROMFORD												
Post Code: E12 6TJ																				
Tel No:	o: 079 0311 3078																			
Reg Gas Eng	gineer:	er: TALIB HUSSAIN		Gas Safe		Post Code:	e: RM6 4YU				Post Cod	le:								
Gas Safe Reg No:		505558		Licence No:		Tel No:						Tel No:	Tel No:		Rented Accommodation: (Y			N) Yes		
APPLIANCE DETAILS Number of appliances tested					2	2 INSPECTION DETAILS														
Location			Appliance Type		Make	Model		Landlord's appliance (Yes/No/ NA)	Appliance Inspected (Yes/No)			Operating Pressure (mbar or Heat Input (kW)	Safety Device(s) Correct Operation (Yes/No/ NA)	Ventilation Provision Satisfactory (Yes/No)	Visual Condition of Chimney / Flue and Termination Satisfactory (Yes/No/NA)	Flue Perform- ance Test (Pass/Fail/ NA)	Appliance Serviced (Yes/No)	Sale to		
1 KITCHEN	1 KITCHEN		COMBI BOILER		VAILLANT	ECOTEC PLUS938		Yes	Yes	RS	0.0008	24 kW	Yes	Yes	Yes	N/A	No	Yes		
2 KITCHEN			HOB		NEVE	4 BURNER		Yes	Yes						YES	Pass		Yes		
3																				
4																				
DEFECT(S			SERIAL NO OF WARNING ADVICE NOTICE IF ISSUED Details of any work carried out N/A																	
1 N/A							Emergency control value accessible (Yes/No) YES													
2 N/A									Gas	s tightness satisfactory (Yes/No/NA) YES Comment s				nent s N/A	4					
3							Gas Installation Pipework Satisfactor						spection (Yes/I	No) YES	3					
4								Protective Equipotential Bonding Satisfactory						YES	3					
REMEDIAL WORK										SIGNATURE AND NAMES										
1 <u>N/A</u>										Safety Record received by: Signed: Print Name: TA						IB HUSSAIN				
2 N/A										Salety Record received by. Signed.										
3											Tenant/Landlord/Home Owner/Other (State below) Date of inspection 10/12/2020									
4											Other: N/A NEXT INSPECTION DUE ON OR BEFORE: 09/12/2021									
		T "	0 0.00	(1) 5	10 5								09/12/2021							
		To confir	m the validity	of the Registe	ered Gas Engineer	carrying out	tnis inspe	ection, ple	ease conta	act Gas S	Safe on 0800 408 5	5// or www.ga	assateregister.c	o.uk		Page 1	Of	1		