



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. No detailed internal inspection of flues (Integrity, Constructions and Lining) has been carried out.

Certificate Reference

10 Watson terr 2019

Certificate No:1959

Engineers Details		Installation Details		Client Details	
Trading Title	Westhill Boiler Services	Installation Address	10 Watson Terrace Alford	Client Address	Winchesters Lettings 22-24 South Mount Street Aberdeen
Address	11 Hilltop Gardens Westhill Aberdeenshire Post Code: AB326PN		Post Code: AB338UR		Post Code: AB252TB
Gas Safe No:	553934	Telephone No:	07534934965	Telephone No:	

Appliance Details					Inspection Details												
Location	Appliance Type	Make	Model		CO2 Reading	CO Reading	Flue Type (OF/RS/FL)	Appliance Inspected (YES/NO/NA)	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)
Kitchen	Central heating	Ariston	Clas He System		9.3	45	RS	YES	0.0005	YES	18 kw	YES	YES	YES	PASS	YES	YES
Kitchen	Hob	Apell	4 Burner				FL	YES	0	YES	5.8 kw	YES	YES	N/A	N/A	YES	YES

Faults/Notes	Remedial Work Taken	Warning Notice Fixed
1		
2		
3		
4		
5		

Emergency Control Valve accessible:	<input checked="" type="checkbox"/> YES	Gas Tightness Satisfactory:	<input checked="" type="checkbox"/> YES	Signatures		Gas ID Number:	553934
Gas Installation Pipework Visual Inspection Satisfactory:	<input checked="" type="checkbox"/> YES	Report Issued By:	Name: Shaun Sinclair	Signed:	Date:	Wed-11-12-2019	
Number Of Appliances Tested:	2	Equipotential Bonding:	<input checked="" type="checkbox"/> YES	Report Received By:	Name:	Signed:	Date: Wed-11-12-2019
NEXT INSPECTION DUE ON OR BEFORE:	Thu-10-12-2020	Installation Pass:	<input checked="" type="checkbox"/> YES	Name:		Signed:	