

# GAS SAFETY / LANDLORD CERTIFICATE

No. **662577**

**REGISTERED BUSINESS DETAILS**  
 Reg No.: **188778**  
 Gas Engineer: **Steven Parkin**  
 Gas Safe registered engineer No.: **4249246**  
 Company: **S.P. Parkin Plumbing & Heating**  
 Address: **30 Woodland Ave, Braoston Derbyshire**  
 Postcode: **DE72 3AN** Tel No.: **07904 432554**

**INSPECTION ADDRESS**  
 Rented: Yes  No   
 Name & Title: **Sawley Community Centre**  
 Address: **Draycott Rd, Sawley**  
 Postcode: **DE72 3AN** Tel No.:

**DESCRIPTION OF WORK CARRIED OUT**

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 product of combustion. A detailed internal inspection of the flue integrity, construction and lining has NOT been carried out.

**LANDLORD / CLIENT NAME & ADDRESS (if different)**  
 Name & Title: **Sawley Community Centre**  
 Address: **Draycott Rd, Sawley**  
 Postcode: **DE72 3AN** Tel No.:

Location	Make	Model	Type	Flue type D/RS/FL	Operating pressure in flue (kPa) or Bar	Safety device correct operation Yes/No/NA	Spillage test Pass/Fail/NA	Smoke point flue test Pass/Fail/NA	Combustion analyser reading if applicable	Satisfactory operation Yes/No/NA	Flue visual condition Pass/Fail/NA	Adequate ventilation Yes/No	Landlord's experience Yes/No/NA	Inspected Yes/No	Appliance serviced Yes/No	Appliance Safe to use Yes/No	APPLIANCE DETAILS		FLUE TESTS		INSPECTION DETAILS											
																	Emergency Control Accessible:	Satisfactory Gas Tightness Test:	Equipment Bonding Satisfactory:	Yes	No	Yes	No	Yes	No							
1	Boiler Room	Heston	C40	Boiler	RS	Y	NA	Pass	NA	Yes	Pass	Yes	Yes	Yes	Yes	Yes	Yes															
2	Kitchen	Main	Multipoint	Water H.	RS	Y	NA	Pass	NA	Yes	Pass	Yes	Yes	Yes	Yes	Yes	Yes															
3	Kitchen	Ceple	-	Race	FL	Y	NA	NA	NA	NA	NA	Yes	Yes	Yes	Yes	Yes	Yes															
4																																
5																																

**CARBON MONOXIDE:** Drowsiness, headaches or nausea when a gas appliance is running could be Carbon Monoxide (CO) poisoning. Turn the appliance off **IMMEDIATELY** and seek expert help.

CO alarm(s) fitted: Yes  No  CO alarm(s) tested: Yes  No  Make/Model: \_\_\_\_\_ Date of Manufacture: \_\_\_\_\_

**GIVE DETAILS OF ANY FAULTS**

**RECTIFICATION WORK CARRIED OUT**

Number of appliances tested: \_\_\_\_\_

This record is issued by: **THREE** Signed: **S.P. Parkin** Date: **4th July 2018**

Received by: **Neil Prosser** Signed: **Neil Prosser** Date: **4th July 2018**

Print Name: **S.P. Parkin** Tenant / Agent / Landlord / Home Owner (please as applicable)

**NEXT GAS SAFETY CHECK MUST BE CARRIED OUT WITHIN 12 MONTHS**

Copies: White - Landlord Pink - Customer/Tenant (if rented) Blue - Engineer

\* If yes, please refer to separate warning/notice notice Code: PH091