

Serial No.  
**B0376664**

# LANDLORD/HOME OWNER GAS SAFETY RECORD

93B



This form allows the recording of the results of the required checks as defined by the Gas Safety (Installation and Use) Regulations. The information recorded on this form does not confirm that the installation was installed by a Registered Installer or that the installation complies with any relevant Building Regulations. Flues were 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** CORGI REG NO **132923**  
 Gas operative R. Harding (Print name)  
 CORGI ID card serial No. 809982702  
 Company Ralph Harding Ltd  
 Address 25 Fox Close  
Cashes Green, Stroud  
 Postcode GL5 4UP Tel No. 01453 762800

**Job Address**  
 Name (Mr/Mrs/Miss/Ms) \_\_\_\_\_  
 Address 1 Cherry Close  
Hardwicke  
Gloucester  
 Postcode GL2 4YF  
 Tel No. \_\_\_\_\_

**Landlord (or where appropriate their agent)**  
 Name (Mr/Mrs/Miss/Ms) Brian Smith  
 Address Property Management  
Regent House  
Bath Road, Stonehouse  
 Postcode GL10 2JD Tel No. 01453 792900  
 Number of appliances tested one

### APPLIANCE DETAILS

	Location	Appliance type	Make	Model	Landlord's appliance Yes/No/NA	Appliance inspected Yes/No	Flue type OF/RS/FL
1	LIVING ROOM	FIRE	VALON	BLACK BEAUTY	Yes	Yes	RS
2				UNIGAS 2 MODEL 473			
3				S/N ART 085100071AE			
4							

### INSPECTION DETAILS

	Operating pressure in mbar or heat input kW/h or Btu/h	Initial combustion analyser reading (if applicable)	Final combustion analyser reading (if applicable)	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 checks Pass/Fail/NA	Appliance serviced Yes/No	Appliance safe to use Yes/No
1	10 mbar	NA	NA	Yes	Yes	Yes	NA	NEW FIRE	Yes
2									
3									
4									

**DEFECT(S) IDENTIFIED**

1	
2	
3	
4	

If Warning/Advice Notice issued insert serial No.\*

Gas installation pipework satisfactory visual inspection Yes/No  Yes  
 Emergency Control Valve accessible Yes/No  Yes  
 Satisfactory gas tightness test Yes/No/NA  Yes  
 Equipotential bonding satisfactory Yes/No  Yes

**NEXT SAFETY CHECK DUE WITHIN 12 MONTHS**

**REMEDIAL ACTION TAKEN**

1	
2	
3	
4	

This Safety Record issued by: Signed Mandy  
 Print Name: R. HARDING  
 Received by: Signed [Signature] Tenant/Landlord/Agent/Home Owner  
 Date appliance(s)/flue(s) checked: 26-01-09

Tamblyn.



This report is not valid if the serial number has been defaced or altered

HP/ 0232066

# PERIODIC INSPECTION REPORT FOR AN ELECTRICAL INSTALLATION

Issued in accordance with *British Standard 7671 - Requirements for Electrical Installations* by an Approved Contractor or Conforming Body enrolled with the National Inspection Council for Electrical Installation Contracting, Vintage House, 37 Albert Embankment, London SE1 7UJ.

For explanatory notes relating to software endorsement, see 'Notes for Recipients'

## A. DETAILS OF THE CLIENT

Client: [ ] Address: [ ]

## B. PURPOSE OF THE REPORT

This Periodic Inspection Report must be used only for reporting on the condition of an existing installation.

Purpose for which this report is required: Tenance

## C. DETAILS OF THE INSTALLATION

Occupier: [ ] Description of premises: Domestic  Commercial [ ] Industrial [ ]  
Address: Tamblyn, Tanzelet court, Skimbridge, Ales. Other: [ ]  
Estimated age of the electrical installation: 10 years  
Evidence of alterations or additions:  If yes, estimated age: 24 years  
Date of previous inspection: [ ] Electrical Installation Certificate No or previous Periodic Inspection Report No: [ ]  
Records of installation available: [ ] Records held by: [ ]

## D. EXTENT OF THE INSTALLATION AND LIMITATIONS OF THE INSPECTION AND TESTING

Extent of the electrical installation covered by this report: All  
Agreed limitations, if any, on the inspection and testing: None

This inspection has been carried out in accordance with BS 7671: 2001, as amended. Cables concealed within trunking and conduits, or cables and conduits concealed under floors, in inaccessible roof spaces and generally within the fabric of the building or underground, have not been visually inspected.

## E. DECLARATION

I/We, being the person(s) responsible for the inspection and testing of the electrical installation (as indicated by my/our signatures below), particulars of which are described above (see C), having exercised reasonable skill and care when carrying out the inspection and testing, hereby declare that the information in this report, including the observations (see F) and the attached schedules (see H), provides an accurate assessment of the condition of the electrical installation taking into account the stated extent of the installation and the limitations of the inspection and testing (see D).  
I/We further declare that in my/our judgement, the said installation was overall in satisfactory condition (see G) at the time the inspection was carried out, and that it should be further inspected as recommended (see I).  
*(Insert 'a satisfactory' or 'an unsatisfactory', as appropriate)*

### INSPECTION, TESTING AND ASSESSMENT BY:

Signature: [Signature]  
Name: G. NoBHE  
Position: Electrician  
Date: 18/12/02

### REPORT REVIEWED AND CONFIRMED BY: † See note below

Signature: [Signature]  
Name: M TURNER  
*(Registered Qualified Supervisor for the Approved Contractor at J)*  
Date: 18/12/02

† This Periodic Inspection Report should be reviewed and confirmed by the registered Qualified Supervisor for the Approved Contractor responsible for issuing the Report.

Please see the 'Notes for Recipients' on the reverse of this page.

Original (To the person ordering the work)