

Landlord Gas Safety Record

Cert. No. 1619

PLATINUM PROPERTY SERVICES (WALES)Ltd.
YOUR LOCAL GAS COMPANY

Safety Inspection and reporting carried out in accordance with the Gas Safety (Installation and Use) Regulations and the Gas Industry Unsafe Situations Procedure.

| Company / Installer | |
|---------------------|--|
| Engineer | JASON SANGER |
| Company | PLATINUM PROPERTY SERVICES (WALES)Ltd. |
| Address | MYDAM LODGE 19 Mydam Lane Gorseinon SWANSEA |
| Post Code | SA4 4YA |
| Tel No. | 01792897455 |
| Gas Safe Reg | 227395 |
| ID Card No. | 5296621 |

| Job Address | |
|-------------|-------------------------------------|
| Name | |
| Address | 46 Lon Y Grug Skewen Neath |
| Post Code | SA106FL |
| Tel. No | |

| Customer / Landlord | |
|---------------------|---|
| Name | |
| Company | Davies Homes |
| Address | 8 Borough road Gorseinon Swansea |
| Post Code | |
| Tel. No | 01792448979 |

| Appliance Details | | | | | | Inspection Details | | | | | | | | | | | | | | | |
|-------------------|----------|--------------------|-------|-------------------|-----------|----------------------|---------------------|---------------------------|-------------------|-------------------------|--------|-------|------------------------|--------|-------|------------------------------------|------------------------------------|---|-----------------------|--------------------|-----------------------|
| No | Location | Appliance Type | Make | Model | Flue Type | Landlord's Appliance | Appliance Inspected | Operating Pressure (mbar) | Heat Input (kW/h) | High Combustion Reading | | | Low Combustion Reading | | | Safety device(s) correct operation | Ventilation Provision satisfactory | Visual condition of flue and termination satisfactory | Flue Performance test | Appliance Serviced | Appliance safe to use |
| | | | | | | | | | | Ratio | CO ppm | CO2 % | Ratio | CO ppm | CO2 % | | | | | | |
| 1 | Kitchen | Combination Boiler | Ideal | Logic Combi ES 30 | RS | Yes | Yes | 19 | NA | .0013 | 127 | 9.87 | NA | NA | NA | Yes | Yes | Yes | Pass | Yes | Yes |
| 2 | Kitchen | Hob | Gas | Stainless | RS | NA | Visual | NA | NA | NA | NA | NA | NA | NA | Yes | Yes | Yes | Pass | Yes | Yes | |
| 3 | | | | | | | | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | | | | | | | | | | |
| 6 | | | | | | | | | | | | | | | | | | | | | |

| Defects / Identified | | Labels and Warning Notice Issued |
|----------------------|--|----------------------------------|
| 1 | | NA |
| 2 | | NA |
| 3 | | |
| 4 | | |
| 5 | | |
| 6 | | |


| CO Alarm(s) | | Smoke Alarm(s) | |
|-------------------------------------|------|--|------|
| CO Alarm(s) fitted | Yes | Smoke Alarm(s) fitted | Yes |
| CO Alarm(s) tested and Satisfactory | Pass | Smoke Alarm(s) tested and Satisfactory | Pass |

Emergency Control Accessible Yes Gas Tightness Satisfactory Yes

Gas Installation Pipework Visual Inspection Satisfactory Yes

Equipotential Bonding Yes

NEXT INSPECTION DUE ON OR BEFORE 10-Nov-2023

| Signatures | |
|---|--|
| <p>Issued by: Signed </p> <p>Print Name JASON SANGER</p> | <p>Received Signed </p> <p>Print Name J SANGER</p> |
| Date | 10-Nov-2022 |