Tel No: Postcode:

8664843



MUSICALO TEMEDIAL WORK REQUIRED	AILS OF OTHER WORK CARRIED OUT (e.g. service, etc.)		NCE DEFECT(S) IDENTIFIED REMEDIAL ACTION TAKEN			Operating Pressure Safety Device(s) Visual Condition Chimney/Flue or Heat Input Correct Operation Satisfactory Performance (mbar/k/W) (Yes/No) (Yes/No/NA) (Pasyrlfail/NA) (CHECKS CHIMNEY CHECKS		Cons. Kouse Long	Location Appliance Type	Appl	S (SSH Postcode:	Name: Co	the Landlord, where only visual checks are undertaken, recording a YES in Applications to be based only on a visual check for obvious defects with no physical tests completed. Rented Accommodation (Yes / No.) YSS LANDLORD DETAILS for where appropriate their agent)
SAFETY CHECK DUE BEFORE	NEXT		TAKEN		000	Initial M (If Applicable) (If Ap	COMBUSTION READING(S	5	13 N 4 4	Make	APPLIANCE DETAILS		Solves	ppliance Safe is based only on a visual check for obvious defects v LANDLORD DETAILS (Grahale appropriate their agent)
Licence No:	Issued by: Print Name:	Emergency Control Valve Satisfactory: Meter / Cylinder Installation Satisfactory (Visual): Main Protective Bonding Satisfactory (Visual):				Final Appliance Serviced (Yes/No)	DING(S) SU		F G.SIAN	>				egent).
FAMS	The flat	Satisfactory: 1 Satisfactory (Visual): patisfactory (Visual):	INSTALLATIO		0	ed Appliance Safe (Yes/No)	MMARY		2900	Model		Postcode: ${Q(1)}$	Reg No:	REGISTERED B
Issue Date:	Signed:	Gas Installation Pipework Satisfa Gas Installation Correct Material Gas Tightness Test Satisfactory:	INSTALLATION GENERAL (Yes/No/NA)		3	Correctly Installed (Yes/No/NA	AUDIBL		D.	Chimney/Flue Type Landlord's Appliance Appliance Checked (FL/QF/RS) (Yes/No/NA) (Yes/No)	No o	291 698-4	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	USINESS DETA
16-07-2	i Ar	Gas Installation Pipework Satisfactory (Visual): Gas Installation Correct Materials Used (Visual): Gas Tightness Test Satisfactory:	NO/NA)		3	In Date Te	AUDIBLE CO DETECTOR		0	ndlord's Appliance App (Yes/No/NA)	No of Appliances Listed Relaw	C7988	N HUNG	ILS
6	G	(isual):	er is a	registere	S d trade	Test Satisfactory of		HSF and	d is used			55777 Ce.		

Satisfactory (Yes/No) Ventilation

* Refer to separate Warning Notice(s)

Top Copy - Landlord / Managing Agent / Home Owner Middle Copy - Tenant Bottom Copy - Registered Business

Print Name: Received by:

MANUS Igned:

Tenant / Home Owner / Landlord / Other (please state)

No one present at the time of visit To re-order quote Ref. CP12

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