




Gas Tightness Test									
Gas tightness test carried out (Yes / No)	Yes	Total Installation volume (m <sup>3</sup> )	0.0032	Max allowable pressure drop (mbar)	4	Type of gauge used (water / electronic)	Electric	Tightness test result (Pass / Fail)	
Where was the Test carried out from?	ECV	Let by test duration (mins)	1	Volume smallest occupied space (m <sup>3</sup> )	N/A	Smell of gas	N/A	Pass	
Scope of work (e.g. IGE/UP/1 or 1A or 1B)	IGE/UP/1B	Stabilisation period (mins)	1	Tightness test pressure (TTP) (mbar)	21.89	CO Alarm			
						CO Alarm Installed	Date Of Expiry	CO Pass/Fail	
Installation (New / Existing / Extension)	Existing	Tightness test duration (mins)	2	Actual pressure drop (mbar)	0	Yes	10/2035	Pass	
Meter Information									
Gas Meter Present	Yes	Meter room secure	N/A	Meter room key labelled	N/A	Standing pressure (mbar)		Working pressure at Appliances (mbar)	
Meter size	U6	Meter accessible	Yes	Meter room ventilated	N/A	Working pressure at meter	21.78	18.90	
ECV labelled	Yes	Does ECV operate easily	Yes	Adequate gas isolation	Yes	Suitably sleeved Area Adjacent Meter	Yes	Meter Labelling Correct	
Pipework colour coded /identified from point of Test	N/A	Line diagram at meter (current)	N/A	Clear of combustibles	N/A	Installation cross bonded	Yes	N/A	
Gas pipe supported (Where Visible) from point of Test	Yes	Meter Location	Outside meter box		Flue Dilution (CO <sub>2</sub> ) %	N/A	Air Sample (CO <sub>2</sub> ) %	N/A	
Manometer Make	Testo	Serial No	26884240	Analyser Make	Testo	Serial No	61857248		
Description of work: Boiler service and co device chekc									
Defects					Remedial work required				
No 1	Cupboard very tight around case at the top				Uni carpenters to cut out top of cupboard and make new				
No 2									
No 3									
No 4									
No 5									
No 6									
No 7									
No 8									
Parts used			Part Number		Qty		Declaration of Gas safety: I confirm that all of the work described on this form has been satisfactorily completed in accordance with the current Gas Safety (Installation & Use) regulations, industry standards and procedures.		
Print Name	Jack Williams		Engineer's Signature						
The work has been carried out to my satisfaction. I agree to pay for all chargeable work carried out and the cost of any parts ordered and/or supplied.									
Print Name	No person present		Customer Signature						

## Tightness Test Carried out from this Valve 'Label'



### Measurement protocol

**General information**

**Customer**  
1 Cryfield Cottage

**Instrument information**

**Instrument name/Serial number**      **Measurement parameter**  
testo 510 (46884240)      Differential pressure

**Measurement parameters**

**Measuring mode**      Timed  
**Measuring cycle**      30 sec  
**Use stabilisation time**      Yes  
**Measurement duration (target)**      2 min 0 sec  
**Pressure probe**      testo 510 (46884240)  
**Fuel type**      Natural gas

**Measurement**

**Maximum pressure drop**  
**Fuel pressure drop**

Date/Time	Δp0 [mbar]
01.04.2008 12:36:47	21.89
01.04.2008 12:37:07	21.91
01.04.2008 12:37:27	21.94
01.04.2008 12:37:47	21.96
01.04.2008 12:38:07	21.98
01.04.2008 12:38:27	22.01
01.04.2008 12:38:47	22.02

## Appliance Flue Termination



### Warning Label 'if Applicable'

### CO Expiry Date

### Location of

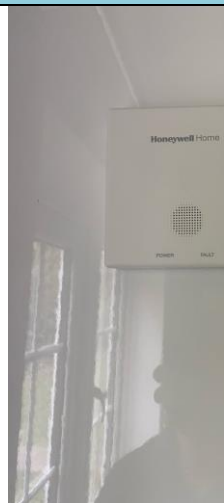
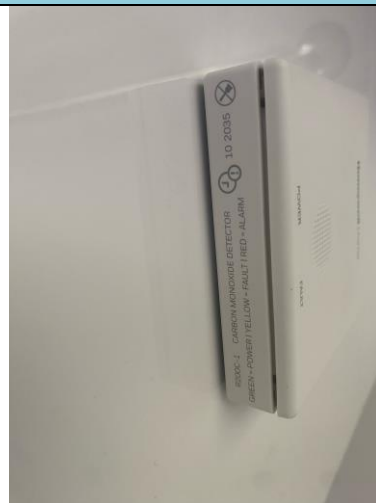


Photo of Unsafe Situation	Defect 1	Defect 2
		
Defect 3	Defect 4	Defect 5
Defect 6	Defect 7	Defect 8