



**Gas Tightness Test**

Gas tightness test carried out (Yes / No)	Yes	Total Installation volume (m³)	0.0028	Max allowable pressure drop (mbar)	4.1	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 (m³)	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)	20.32	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	20.65		19.14
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	Yes	Line diagram at meter (current)	N/A	Clear of combustibles	Yes	Installation cross bonded	Yes	Yes	
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, co device check and cp12 This

Defects	Remedial work required
No 1	
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**

<b>Customer</b> 93 Heronbank Staff Flat	<b>Name of measurement program</b> Tightness test	<b>Date of measurement</b> 20/10/2025 15:50:40
--	--	---

**Instrument information**

<b>Instrument name/Serial number</b> welo 510 (46884240)	<b>Measurement parameters</b> Differential pressure
---	--

**Measurement parameters**

Measuring mode	Timed	Maximum pressure drop	4.00 mbar
Measuring cycle	20 sec	Pressure start (P-Start)	20.32 mbar
Use stabilization time	Yes	Measurement result	Passed
Measurement duration (target)	2 min 0 sec	Start time	20/10/2025 15:48:24
Pressure probe	welo 510 (46884240)	End	20/10/2025 15:50:24
Fuel type	Natural gas	Duration	2 min 0 sec

**Measurement**

Maximum pressure drop	4.00 mbar
Final pressure drop	0.00 mbar

Date/Time	ΔP [mbar]	ΔP current [mbar]
20/10/2025 15:48:24	20.32	0.05
20/10/2025 15:48:44	20.37	0.05
20/10/2025 15:49:04	20.37	0.05
20/10/2025 15:49:24	20.36	0.04
20/10/2025 15:49:44	20.36	0.04
20/10/2025 15:50:04	20.36	0.04
20/10/2025 15:50:24	20.32	0.00



## Appliance Flue Termination



### Warning Label 'if Applicable'

### CO Expiry Date

### Location of CO Alarm



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