

## **Gas Servicing Record**



| 309                                  | 09                   |                      |          |                      |               |               |            |            |         |      |     |      | COMME | RCIAL   INDUSTRIAL | DOMESTIC                                         |      |
|--------------------------------------|----------------------|----------------------|----------|----------------------|---------------|---------------|------------|------------|---------|------|-----|------|-------|--------------------|--------------------------------------------------|------|
| Certificate<br>Number                | Job R                | ef                   | 14706    |                      | Address       |               | ad Lana    |            |         |      |     |      |       |                    |                                                  |      |
| 757                                  | Eng. N               | ame                  | Sean M   | olonev               | UIIIL 1-2     | , 403 Bro     | au Lane    |            |         |      |     |      |       |                    |                                                  |      |
| 131                                  | Gas Saf              |                      | 539517   |                      | Coventr       |               |            |            |         |      |     |      |       |                    |                                                  |      |
| Company                              | Work Ca              |                      | 01/06/2  |                      |               | x<br>77170800 | )          |            |         |      |     |      |       |                    |                                                  |      |
| Gas safe No:                         | out Da               | te                   |          |                      |               | 77 17 0000    | ,          |            |         |      |     |      |       |                    |                                                  |      |
| 30909                                | Next Ser<br>due Da   |                      | 01/06/2  | 4                    |               |               |            |            |         |      |     |      |       |                    |                                                  |      |
| Site Addres                          | ss:                  |                      |          |                      |               |               |            |            |         |      |     |      |       |                    |                                                  |      |
| . Occupier                           |                      |                      |          |                      |               | ob Comp       |            |            |         | Ye   |     |      |       |                    |                                                  |      |
| Lakeside A                           | partments            |                      |          |                      | Unsafe        | situation     | identified | d (classif | cation) | No   | )   |      |       |                    |                                                  |      |
| Staff Flat No                        | o 1                  |                      |          |                      |               |               |            |            |         |      |     |      |       |                    |                                                  |      |
| CV4 7AI                              |                      |                      |          |                      |               |               |            |            |         |      |     |      |       |                    |                                                  |      |
|                                      |                      |                      |          |                      | Has a V       | Varning n     | otice be   | en issued  |         |      |     |      |       |                    |                                                  |      |
| Sheet                                | 1                    | of                   |          | 3                    | Warnin        | g notice n    | umber      |            |         |      |     |      |       |                    |                                                  |      |
|                                      |                      |                      |          |                      |               | applianc      |            |            |         |      |     |      |       |                    |                                                  |      |
| Have you o<br>Yes                    | completed            | all risk a           | ssessm   | ents :               | Has the       | responsi      | ble pers   | on been i  | nformed |      |     |      |       |                    |                                                  |      |
| How many                             | appliance            | s have b             | een test | ted                  | I             |               |            |            |         |      | One |      |       |                    | -                                                |      |
|                                      | liance No.           |                      | No 1     |                      |               | No 2          |            | L          | No      | 3    |     |      | No 4  |                    |                                                  |      |
|                                      | Make                 |                      |          | VORCEST              | ER            | 10-2          |            |            |         |      |     |      | 110 4 |                    |                                                  |      |
|                                      | Model                |                      | Cov      | 30Si<br>ndensing B   | oilore        |               |            |            | _       |      |     |      |       |                    |                                                  |      |
|                                      | ance Type<br>Ref No  | S                    | ERIAL NU | MBER 829             | 0-211-061485- |               |            |            | +       |      |     |      |       |                    |                                                  |      |
| L                                    | ocation              |                      |          | 771613014<br>Kitchen | 40            |               |            |            |         |      |     |      |       |                    |                                                  |      |
| С                                    | ondition             |                      |          | Fair                 |               |               |            |            |         |      |     |      |       |                    |                                                  |      |
|                                      | liance No.<br>Make   |                      | No 5     |                      |               | No 6          |            |            | No 7    | 7    |     |      | No 8  |                    |                                                  |      |
|                                      | Model                |                      |          |                      |               |               |            |            |         |      |     |      |       |                    |                                                  |      |
|                                      | ance Type<br>Ref No  |                      |          |                      |               |               |            |            |         |      |     |      |       |                    |                                                  |      |
|                                      | ocation              |                      |          |                      |               |               |            |            | +       |      |     |      |       |                    |                                                  |      |
|                                      | ondition             |                      |          |                      |               |               |            |            |         |      |     |      |       |                    |                                                  |      |
| Appliance I                          |                      | No1                  |          | No2                  |               | No3           | 1          | lo4        | N       | lo5  | N   | 06   | 1     | No7                | No                                               | 80   |
| Type Flue flow satisfac              |                      | sealed type C<br>N/a | +        |                      |               |               | 1          |            |         |      |     |      |       |                    |                                                  |      |
| Spillage test                        |                      | N/a                  |          |                      |               |               |            |            |         |      |     |      |       |                    | <del>                                     </del> |      |
| satisfactory<br>Termination          |                      | Yes                  | +        |                      |               |               | 1          |            |         |      |     |      |       |                    | <del>                                     </del> |      |
| satisfactory Visual condition o      | f flue               | Yes                  |          |                      |               |               |            |            |         |      |     |      |       |                    | <del>                                     </del> |      |
| satisfactory<br>Flame proving        | g                    | N/a                  |          |                      |               |               |            |            |         |      |     |      |       |                    | <del>                                     </del> |      |
| satisfactory<br>Burner lock out t    | time                 | 8                    |          |                      |               |               |            |            |         |      |     |      |       |                    | <del>                                     </del> |      |
| (seconds) Temp t/stat opera          | ation                | Yes                  |          |                      |               |               |            |            |         |      |     |      |       |                    | <del>                                     </del> |      |
| satisfactory<br>Ventilation Typ      | ре                   | N/a                  |          |                      |               |               |            |            |         |      |     |      |       |                    |                                                  |      |
| Mechanical vent                      |                      | N/a                  |          |                      |               |               |            |            |         |      |     |      |       |                    |                                                  |      |
| Reqd Ventilation<br>level (cm²)      |                      | N/a                  |          |                      |               |               |            |            |         |      |     |      |       |                    |                                                  |      |
| Reqd Ventilation<br>level (cm²)      | High                 | N/a                  |          |                      |               |               |            |            |         |      |     |      |       |                    |                                                  |      |
| Badged Rating (<br>Nett)             | (kW                  | 30                   |          |                      |               |               |            |            |         |      |     |      |       |                    |                                                  |      |
| Actual Ventilation<br>level (cm²)    | n low                | N/a                  |          |                      |               |               |            |            |         |      |     |      |       |                    |                                                  |      |
| Actual Ventilation                   | on<br><sup>2</sup> ) | N/a                  |          |                      |               |               |            |            |         |      |     |      |       |                    |                                                  |      |
| Ventilation<br>Satisfactory          |                      | N/a                  |          |                      |               |               |            |            |         |      |     |      |       |                    |                                                  |      |
| Firing Mod                           |                      | High                 | Low      | Hig                  | gh Low        | High          | Low        | High       | Low     | High | Low | High | Low   | High               | Low                                              | High |
| Heat input ratir<br>KW               | ng 7.15              | 28.02                |          |                      |               |               |            |            |         |      |     |      |       |                    |                                                  |      |
| Gas Burner Pres<br>Gas Flow Rate     |                      | N/a                  |          |                      |               |               | 1          |            |         |      |     |      |       |                    | <u> </u>                                         |      |
| m³/hr. Ambient (Roor                 | 0.72                 | 2.82                 | 1        | -                    |               |               |            |            |         |      |     |      |       |                    | <u> </u>                                         |      |
| Temperature (°                       | C) 22.3              | 22.5                 | 1        | -                    |               |               |            |            |         |      |     |      |       |                    | <u> </u>                                         |      |
| Flue Gas<br>Temperature (°<br>CO/CO² |                      | 53.36                | 1        | -                    |               |               |            |            |         |      |     |      |       |                    | <u> </u>                                         |      |
| Ratio                                | 0.0000               | 0.0002               | 1        | _                    |               |               |            |            |         |      |     |      |       |                    | <u> </u>                                         |      |
| Oxygen<br>(O²)%                      | 4.9                  | 4.4                  |          | _                    |               | 1             |            |            |         |      |     |      |       |                    | <u> </u>                                         |      |
| Carbon Monoxi<br>(CO) ppm            | 4                    | 16                   |          | _                    |               | 1             |            |            |         |      |     |      |       |                    | <u> </u>                                         |      |
| Carbon Dioxid<br>(CO²)%              | le 9.11              | 9.42                 |          | _                    |               | 1             |            |            |         |      |     |      |       |                    | <u> </u>                                         |      |
| Excess<br>Air                        | 30.6                 | 26.3                 |          |                      |               |               |            |            |         |      |     |      |       |                    |                                                  |      |
| Gross<br>Efficiency                  | 89.1                 | 88.5                 |          |                      |               |               |            |            |         |      |     |      |       |                    |                                                  |      |
| le the appliance                     | 20                   |                      | 1        |                      |               |               |            |            |         |      |     |      | 1     |                    | i                                                |      |

| Gas Tightness Test                                                                                                                                      |                                           |                                |                                 |                                        |                  |                                          |                                  |              |                    |                                         |                                            |                |                                                                                                                    |                            |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|--------------------------------|---------------------------------|----------------------------------------|------------------|------------------------------------------|----------------------------------|--------------|--------------------|-----------------------------------------|--------------------------------------------|----------------|--------------------------------------------------------------------------------------------------------------------|----------------------------|--|--|
| Gas tightness test carried out (Yes / No)                                                                                                               |                                           | Total Installation volume (m³) |                                 | 0.001056                               |                  | Max allowable<br>pressure drop<br>(mbar) |                                  |              |                    | Type of gauge used (water / electronic) |                                            | Electric       | Tightness test<br>result (Pass / Fail)                                                                             |                            |  |  |
| Where was the Test ECV Let by test duration (mins)                                                                                                      |                                           | 1                              |                                 | Volume smallest<br>occupied space (m³) |                  |                                          |                                  | Smell of gas |                    | N/A                                     | Pass                                       |                |                                                                                                                    |                            |  |  |
|                                                                                                                                                         |                                           | Stabilis<br>(mins)             | Stabilisation period            |                                        | 1                |                                          | Tightness test<br>pressure (TTP) |              | 20                 |                                         |                                            |                |                                                                                                                    |                            |  |  |
| IGE/UP/1 or 1A or<br>1B)                                                                                                                                |                                           | (mins)                         |                                 |                                        |                  | (mbar)                                   |                                  |              |                    | CO Alarm Installed                      |                                            | Date Of Expiry | CO Pass/Fail                                                                                                       |                            |  |  |
| Installation (New / Existing Existing / Extension)                                                                                                      |                                           | Tightness test duration (mins) |                                 | 2                                      |                  | Actual pressure<br>drop (mbar)           |                                  | 0            |                    | Yes                                     |                                            | 07/2033        | Pass                                                                                                               |                            |  |  |
| Meter Information                                                                                                                                       |                                           |                                |                                 |                                        |                  |                                          |                                  |              |                    |                                         |                                            |                |                                                                                                                    |                            |  |  |
| Meter Location Externally rear of property                                                                                                              |                                           | Meter room secure              |                                 |                                        |                  | Meter room key<br>labelled               |                                  |              |                    | Standing pressure<br>at meter (mbar)    |                                            | 26.47          | Working pressure<br>at Appliances<br>(mbar)                                                                        |                            |  |  |
| Meter size U6                                                                                                                                           |                                           | Meter accessible               |                                 | Yes                                    |                  | Meter room<br>ventilated                 |                                  |              |                    | Working pressure at<br>meter            |                                            | 20.98          | 19.95                                                                                                              |                            |  |  |
| ECV la                                                                                                                                                  | belled                                    | Yes                            | Does ECV operate easily         |                                        | Yes              |                                          | Adequate gas isolation           |              | Yes                |                                         | Suitably sleeved<br>Area Adjacent Meter    |                | Yes                                                                                                                | Meter Labelling<br>Correct |  |  |
| coded                                                                                                                                                   | ork colour<br>/identified<br>oint of Test | Yes                            | Line diagram at meter (current) |                                        | N/a              |                                          | Clear of combustibles            |              | Yes                |                                         | Installation cross<br>bonded               |                | Yes internally                                                                                                     | Yes                        |  |  |
| (Where                                                                                                                                                  | pe supported<br>Visible)<br>oint of Test  | Yes                            |                                 |                                        |                  |                                          |                                  |              | Flue Dilution      | n (CO₂) %                               | N/a                                        |                | Air Sample (CO <sub>2</sub> ) %                                                                                    | N/a                        |  |  |
| Manor                                                                                                                                                   | meter Make                                | Testo                          |                                 | Serial N                               | 0                | N/a                                      |                                  | Analyse      | Analyser Make Test |                                         |                                            |                | Serial No 61857248                                                                                                 |                            |  |  |
| Descri                                                                                                                                                  | ption of work                             | : Tightness test, bo           |                                 |                                        | co alaim         |                                          |                                  |              |                    |                                         |                                            |                |                                                                                                                    |                            |  |  |
|                                                                                                                                                         | n                                         |                                | Def                             | ects                                   |                  |                                          |                                  |              | <del>, ,,</del>    |                                         | Remedial wo                                |                | equired                                                                                                            |                            |  |  |
| No 1<br>No 2                                                                                                                                            | Boxing in aroun                           | d test flue test point         |                                 |                                        |                  |                                          |                                  | Boxing can   | be removed bu      | it makes tak                            | ing readings difficu                       | lt             |                                                                                                                    |                            |  |  |
| No 3                                                                                                                                                    |                                           |                                |                                 |                                        |                  |                                          |                                  |              |                    |                                         |                                            |                |                                                                                                                    |                            |  |  |
| No 4                                                                                                                                                    |                                           |                                |                                 |                                        |                  |                                          |                                  |              |                    |                                         |                                            |                |                                                                                                                    |                            |  |  |
| No 5                                                                                                                                                    |                                           |                                |                                 |                                        |                  |                                          |                                  |              |                    |                                         |                                            |                |                                                                                                                    |                            |  |  |
| No 6                                                                                                                                                    |                                           |                                |                                 |                                        |                  |                                          |                                  |              |                    |                                         |                                            |                |                                                                                                                    |                            |  |  |
| No 7                                                                                                                                                    |                                           |                                |                                 |                                        |                  |                                          |                                  |              |                    |                                         |                                            |                |                                                                                                                    |                            |  |  |
| No 8                                                                                                                                                    |                                           |                                |                                 |                                        |                  |                                          |                                  |              |                    |                                         |                                            |                |                                                                                                                    |                            |  |  |
| Parts used                                                                                                                                              |                                           |                                |                                 |                                        |                  | Part Number                              |                                  |              | Qty                |                                         | ti                                         |                | Declaration of Gas safety: I confirm that all of the work described on this form has been satisfactorily completed |                            |  |  |
|                                                                                                                                                         |                                           |                                |                                 |                                        |                  |                                          |                                  |              |                    |                                         |                                            |                | accordance with th                                                                                                 | , ,                        |  |  |
| Co alarm                                                                                                                                                |                                           |                                |                                 |                                        |                  |                                          |                                  |              |                    |                                         | safety (Installation & ndustry standards a | , •            |                                                                                                                    |                            |  |  |
|                                                                                                                                                         |                                           |                                |                                 |                                        |                  |                                          |                                  |              |                    |                                         |                                            |                |                                                                                                                    |                            |  |  |
| Print Name Sean Moloney 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                                                                                                                            |                                           |                                |                                 | Custor                                 | stomer Signature |                                          |                                  |              |                    |                                         |                                            |                |                                                                                                                    |                            |  |  |

|                               | Tightness Test Carried out from this Valve 'Label'                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                      |
|-------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
|                               | this valve Label                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                      |
|                               | Appliance Flue Termination                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                      |
|                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                      |
| Warning Label 'if Applicable' | CO Expiry Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Location of CO Alarn |
|                               | A MONORINE OFFICE OFFIC |                      |

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