

Gas Servicing Record



| 3090 | 9 | | | | | | | | | | | | COMME | RCIAL INDUSTRIAL | DOMESTIC | | |
|---|----------------------|-------------------------|-----------|--|-----------|----------|------------|-------------|----------|------|--|------|----------|--------------------|----------|------|--|
| Certificate | Job Re | f | 14730 | | Address | | | | | | | | | | | | |
| Number | | | a),, , | | Unit 1-2, | 403 Broa | ad Lane | | | | | | | | | | |
| 788 | Eng. Na | | Sean Mol | oney | Coventry | | | | | | | | | | | | |
| ~ | Gas Safe | e ID NO 5395175 CV5 7AX | | | | | | | | | | | | | | | |
| Company Gas safe No : | Work Car out Date | | 07/06/23 | | +44 0247 | 7170800 |) | | | | | | | | | | |
| 30909 | Next Serv | | 07/06/24 | | | | | | | | | | | | | | |
| | due Dat | | 07/00/24 | | | | | | | | | | | | | | |
| Site Addres | | | • | | | | | | | | | | | | | | |
| | | | | | Is the Jo | b Comp | lete | | | Ye | es | | | | | | |
| . Occupier Lakeside A | nartmente | | | | Unsafe s | ituation | identified | l (classifi | ication) | No |) | | | | | | |
| Staff Flat No | 29 | | | | | | | | | | | | | | | | |
| CV4 7AI | | | | | | | | | | | | | | | | | |
| | | 1 | | | 11 10 | | -C b | | | | | | | | | | |
| Sheet | 1 | -f | | 2 | | | | en issued | | | | | | | | | |
| Sileet | ' | of | | 3 | Warning | | | اء مالمط | | | | | | | | | |
| Have you c | ompleted : | all rick a | ecasema | nte · | Has the | | | on been i | nformed | | | | | | | | |
| Yes | ompictou t | an non a | 000001110 | | 1100 1110 | гоороны | bio poroc | on boom | mormoa | | | | | | | | |
| How many a | annliances | have he | en teste | d | | | | | | | One | | | | | | |
| | | | | - | | , N | | | | | | | | | | | |
| | iance No. Make | | No 1 | RCESTER | No 2 No 3 | | | | | | | | No 4 | | | | |
| | Model | | Green | star 24i Juni | or | | | | | | | | | | | | |
| | ance Type | | | ensing Boiler 00058350 | rs | | | | - | | | | | | | | |
| | Ref No ocation | | | Kitchen | | | | | | | | | | | | | |
| | ondition | | | Fair | | | | | | | | | | | | | |
| | iance No. Make | | No 5 | | | No 6 | | | No 7 | | | | No 8 | | | | |
| | Model | | | | | | | | | | | | | | | | |
| | ance Type Ref No | | | | | | | | | | | | | | | | |
| | ocation | | | | | | | | + | | | | | | | | |
| Co | ondition | | | | | | | | | | _ | | _ | | | | |
| Appliance N | lo I | No1 | | No2 | 1 | 103 | N | lo4 | N | o5 | N | 06 | 1 | No7 | No | 8 | |
| Туре | _ | aled type C | | | | | | | | | | | | | | | |
| Flue flow satisfact Spillage test | | N/a | | | | | | | | | + | | | | | | |
| satisfactory Termination | - | N/a | | | | | | | | | + | | | | | | |
| satisfactory Visual condition of | fluo | Yes | | | | | | | | | | | | | | | |
| satisfactory Flame proving | . | Yes | | | | | | | | | | | | | | | |
| satisfactory Burner lock out ti | | N/a | | | | | | | | | <u> </u> | | ļ | | | | |
| (seconds) Temp t/stat opera | tion | 3 | | | - | | | | | | <u> </u> | | | | | | |
| satisfactory | | Yes | | | | | | | | | - | | | | | | |
| Ventilation Typ Mechanical vent / | flue | N/a N/a | | | | | | | | | 1 | | | | | | |
| interlock satisfact Regd Ventilation | low | N/a | | | | | | | | | 1 | | | | | | |
| level (cm²) Reqd Ventilation I | liah | | | | 1 | | | | | | | | | | | | |
| level (cm²) Badged Rating (l | ι-\Λ <i>I</i> | N/a | | | | | | | | | | | | | | | |
| Nett) Actual Ventilation | low | 24 | | | | | | | | | | | | | | | |
| level (cm²) Actual Ventilation | on | N/a | | | | | | | | | | | | | | | |
| High level (cm² Ventilation | , | N/a | | | 1 | | | | | | | | | | | | |
| Satisfactory | | N/a High | Low | High | Low | Lliab | Low | High | Low | High | Low | High | Low | High | Low | High | |
| Firing Mod Heat input ratin | | High st Unable to te | Low | High | Low | High | LOW | riigii | LOW | High | LOW | High | LOW | High | LOW | High | |
| KW Gas Burner Press | _ | N/a | | | | | | | | | + | | | | | | |
| Gas Flow Rate | | N/a | | | | | | | | | | | | | | | |
| m³/hr. Ambient (Room | 1) 17.2 | 20.4 | 1 | | | | | | | | 1 | | | | | | |
| Flue Gas | 58.1 | 60.8 | 1 | | 1 | | | | | | 1 | | | | | | |
| Temperature (°C | 0.0001 | 0.0004 | 1 | | 1 | | | | | | † | | | | | | |
| Ratio Oxygen | 4.7 | 4.4 | 1 | + | | | | | | | + | | | | | | |
| (O²)% Carbon Monoxid | | 37 | 1 | + | + | | | | | | + | | | | | | |
| (CO) ppm Carbon Dioxide | 0 | 9.38 | 1 | + | 1 | | | | | | 1 | | | | | | |
| (CO ²)% Excess | 9.24 | | | + | + | 1 | | | | | + | | | | | | |
| Air Gross | 28.8 | 26.8 | 1 | + | 1 | | | | | | 1 | | <u> </u> | | | | |
| Efficiency | 88 | 88.1 | 1 | | - | | | | | | | | | | | | |

| Gas Tightness Test | | | | | | | | | | | | | | | |
|---|-----------|--------------------------------|-----------------------------------|--|-----|--------------------------------|--|--|---|---|--------------------------------------|--|--|---|--|
| | | | Fotal Installation /olume (m³) | | | | Max allowable pressure drop (mbar) | | | Type of gauge used (water / electronic) | | Electric | Tightness test result (Pass / Fail) | | |
| Where was the Test ECV Let by test duration (mins) | | | | Volume smallest occupied space (m³) | | | | Smell of gas | | N/A | Pass | | | | |
| Scope of work (e.g. IGE/UP/1B | | IGE/UP/1B | Stabili: (mins) | sation period | 1 | | Tightness test pressure (TTP) | | 20 | | CO Alarm | | | | |
| 1B) | | (mins) | | | | (mbar) | | | | CO Alarm Installed | | Date Of Expiry | CO Pass/Fail | | |
| Installation (New / Existing Existing / Extension) | | Tightness test duration (mins) | | | | Actual pressure drop (mbar) | | 0 | | Yes | | 09/2025 | Pass | | |
| Meter Information | | | | | | | | | | | | | | | |
| Meter Location External property | | Externally front of property | Meter room secure | | | | Meter room key labelled | | | | Standing pressure at meter (mbar) | | 23.39 | Working pressure at Appliances (mbar) | |
| Meter size U6 | | U6 | Meter accessible | | Yes | | Meter room ventilated | | | | Working pressure at meter | | 22.03 | 20.68 | |
| ECV labelled Yes | | Does ECV operate easily | | Yes | | Adequate gas isolation | | | | Suitably sleeved Area Adjacent Meter | | Yes | Meter Labelling Correct | | |
| Pipework col coded /identi from point of | ified | Yes | | iagram at (current) | N/a | | Clear of combus | | Yes | | Installation cross bonded | | Yes internally | Yes | |
| Gas pipe sup (Where Visibl from point of | le) | Yes | | | | | | | Flue Dilut | ion (CO₂) % | N/a | | Air Sample (CO₂) % | N/a | |
| Manometer | Make | Testo | | Serial No N/a | | | | Analyse | er Make | Testo | | | Serial No 618 | 357248 | |
| Description of work: Tightness test, boiler service and co alarm tested. | | | | | | | | | | | | | | | |
| No. 1 Manual | vant nair | nt at top of heat exchar | | fects | | | | Paica a job | Remedial work required Raise a job to replace manual vent point | | | | | | |
| | | t disintegrated when re | _ | | | | | | Replaced flue air test point on service | | | | | | |
| | | internally not sealed b | | | | | | | Seal around flue internally | | | | | | |
| No 4 Electric | power su | apply to boiler needs ti | dying up |) | | | | Recommen | Recommend boiler wired straight from fuse spur into boiler not through a junction box | | | | | | |
| No 5 Boiler case controls cover missing | | | | | | | New boiler | New boiler case control cover needs to be fitted | | | | | | | |
| No 6 | | | | | | | | | | | | | | | |
| No 7 | | | | | | | | | | | | | | | |
| No 8 Part Number Qty Declaration of Gas safety: Loopfirm | | | | | | | | | | fatur landina | | | | | |
| , and used | | | | | | | | 1 | | t | | Declaration of Gas safety: I confirm that all of the work described on this form has been satisfactorily completed | | | |
| | | | | | | | | | | | | ir | accordance with th | e current Gas | |
| Flue air test point cap | | | | | | | | | | | | Safety (Installation & Use) regulations, industry standards and procedures. | | | |
| | | | | | | | | | | | | | | | |
| Print Sean Moloney Engineer's Signature | | | | | | | | | | | | | | | |
| Name Engineer's Signature | | | | | | | | | | | | | | | |
| (8) | | | | | | | | | | | | | | | |
| 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. | | | | | | | | | | | | | | | |
| No person present Print Name | | | Custor | Customer Signature | | | | | | | | | | | |

| | Tightness Test Carried out from this Valve 'Label' | |
|-------------------------------|--|----------------------|
| | | |
| | Appliance Flue Termination | |
| | | |
| Warning Label 'if Applicable' | CO Expiry Date | Location of CO Alarm |
| | The state of the s | |

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