Gas Servicing Record



Sa 3090					uu								ľ			
Certificate Number					Address : Unit 1-2, 403 Broad Lane											
787	Eng N	Jame Sean Moloney			Unit 1-2, 400 DIVau Lane											
707	Eng. NameSean MoloneyGas Safe ID No5395175			loney	Coventry											
Company	Work Carried 07/06/23				CV5 7AX +44 02477170800											
Gas safe No :					+++ 02+17170000											
30909	Next Service 07/06/24															
	due Da	te														
Site Address	S :															
. Occupier					Is the Job Complete Yes											
Lakeside Ap					Unsafe situation identified (classification) No											
Staff Flat No	31															
CV4 7AI																
		1			Has a W	arning no	otice bee	en issued								
Sheet	1	of			Has a Warning notice been issued Warning notice number											
				Has the appliance been labelled												
Have you co Yes	completed all risk assessments :				Has the responsible person been informed											
How many a	ppliance	s have b	een teste	d	One											
Appli	ance No.		No 1			No 2		<u></u>	No	No 3						
Ν	/lake			DRCESTER	R								No 4			
	lodel nce Type			star 24i Junio ensing Boiler					_							
	ef No			x00058341	-											
Lo	cation			Kitchen												
	ndition ance No.		No 5	Fair		No 6			No 7				No 8			
	Alake		NO 3			NO 0							NU 8			
	lodel															
	nce Type ef No															
	cation															
Co	ndition															
Appliance N	•	No1	l	No2	1	No3	ľ	104	N	o5	N	lo6	N	lo7	No	8
Flue Type		ealed type C														
Flue flow satisfacto Spillage test	ory	N/a														
Satisfactory	_	N/a			_											
satisfactory Visual condition of	0	Yes			_											
satisfactory	liue	Yes							 							
Flame proving satisfactory		N/a														
Burner lock out tin (seconds)		2														
Temp t/stat operat satisfactory	ion	Yes	↓↓													
Ventilation Type		N/a		<u>_</u>												
Mechanical vent / f interlock satisfacto	ory	/N/a		<u> </u>												
Reqd Ventilation lo level (cm ²)		iv/a														
Reqd Ventilation H level (cm ²)		N/a														
Badged Rating (k Nett)		24														
Actual Ventilation I level (cm ²)		N/a											_ _			
Actual Ventilation High level (cm ²)		N/a														
Ventilation Satisfactory		N/a														
Firing Mode		High	Low	High	Low	High	Low	High	Low	High	Low	High	Low	High	Low	High
Heat input rating KW	Unable to T	est Unable to t	est													
Gas Burner Presso Gas Flow Rate		N/a														
m³/hr.	IN/a	N/a	_	<u> </u>	_	ļ		ļ					<u> </u>	ļ		
Ambient (Room) Temperature (°C		24		<u> </u>					ļ			ļ				
Flue Gas Temperature (°C) 61	59.3		<u> </u>												
CO/CO ² Ratio	0.0000	0.0004														
Oxygen (O²)%	4.7	3.5														
Carbon Monoxid (CO) ppm	e 4	42														
Carbon Dioxide (CO ²)%	9.21	9.91		1							l					
Excess	29.2	20.1		1	1						1					
Air Gross	88.2	88.4		1	+				<u> </u>			1				<u> </u>
Efficiency Is the appliance safe to use	nce Safe															

						Gas Tigh	tness Te						
Gas tightness test Yes carried out (Yes / No)		Total Installation volume (m ³)		0.001056		Max allowable pressure drop (mbar)		4		Type of gauge us (water / electronic	ed Electric)	Tightness test result (Pass / Fail)	
Where was the Test carried out from?	ere was the Test ECV Let by test duration		1		Volume smallest occupied space (m ³)		29.80		Smell of gas	N/A	Pass		
Scope of work (e.g. IGE/UP/1B		Stabilisation period				Tightness test pressure (TTP) (mbar)		20			CO Alarm	Alarm	
IGE/UP/1 or 1A or 1B)		(mins)								CO Alarm Install	d Date Of Expiry	CO Pass/Fail	
Installation (New / Existing Existing / Extension)		Tightness test duration (mins)		2		Actual pressure drop (mbar)		0		Yes	09/2024	Pass	
						Meter In	formatior	1		•			
Meter Location Externally front of property		Meter room secure		Meter box		Meter room key labelled				Standing pressur at meter (mbar)	e 31.23	Working pressure at Appliances (mbar)	
Meter size U6		Meter accessible		Yes		Meter room ventilated		N/a		Working pressure meter	e at 20.04	21	
ECV labelled	Yes	Does ECV operate easily		Yes		Adequate gas isolation		Yes		Suitably sleeved Area Adjacent Me	Yes	Meter Labelling Correct	
Pipework colour coded /identified from point of Test	Yes	s Line diagram at N/a Clear of Yes combustibles			Installation cross bonded	Yes internally	Yes						
Gas pipe supporte (Where Visible) from point of Test	d Yes							Flue Dilution (CO ₂) %		N/a	Air Sample (CO₂) ۶	ν/a	
Manometer Make	Testo	Ş	Serial N	0	N/a		Analyse	er Make	Testo		Serial No 61	857248	
		Defects								Remedial wor	<pre>c required</pre>		
	ilding I noticed the prv p vas full of water	pipe was dripping	g and boil	er pressure	was high, che	cked expansion	Job raising	for a new expan	sion vessel	to be fitted			
No 2 Boiler control	cover missing						New boiler	control cover ne	eeds fitting				
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 Safety (Installation & Use) regu industry standards and procee			Use) regulations,		
												ana procedures.	
	Moloney		Enginee	er's Signa	iture	(\frown				1		
Name	vame												
The work has bee	en carried out to my	satisfaction.	l agree	to pay for	all charge	able work ca	arried out	and the cost	of any pa	rts ordered and/o	r supplied.		
No j Print Name	person present		-	Custor	ner Signatu	ıre							

	Tightness Test Carried out from this Valve 'Label'	
	Appliance Flue Termination	
Warning Label 'if Applicable'	CO Expiry Date	Location of CO Alarm
	A constant of the second of th	

Photo of Unsafe Situation	Defect 1	Defect 2
	SB0-108-04204-7718130141	
Defect 3	Defect 4	Defect 5
Defect 6	Defect 7	Defect 8