

Gas Servicing Record



													COMME	RCIAL INDUSTRIAL	DOMESTIC	
Certificate Number	Job Re	ef	14153		Address	: 403 Broa	nd Lana									
323	Eng. Na	ame	SEAN				au Lane									
323			MOLONI	ΞY	Coventry CV5 7AX	,										
C	Gas Safe		5395175			77170800										
Company Gas safe No :	Da	ite	2023-02-2	27	02											
30909																
Site Address	S:									L.						
					Is the Job Complete Yes Unsafe situation identified (classification) No											
10 The Cres					Unsafe s	situation i	dentified	l (classifi	cation)	No)					
Wellesbourn CV35 9EQ	ne															
CV35 9EQ																
Sheet	1	1 of 2		Has a Warning notice been issued												
					Has the appliance been labelled											
Have you completed all risk assessments : Yes			nts :	Has the responsible person been informed												
How many a	appliances	have be	een teste	d							One					
	iance No.		No 1			No 2			No	3			No 4			
	Make			RCESTER												
	Model		Cond	2000 ensing Boiler	-c				-							
	ance Type Ref No			00058324					+							
Lo	ocation			Kitchen												
	ondition iance No.		No 5	Good		No 6			No	7			No 8			
	Make		NO 3			NOO			NO	1			NO 8			
	Model															
	ance Type Ref No															
	ocation															
Co	ondition															
Appliance N		No1	ı	lo2		No3	N	lo4	N	lo5	N	lo6	ı	No7	No	08
Type		ealed type C														
Flue flow satisfact Spillage test	_	N/a			-											
satisfactory Termination		N/a													-	
satisfactory Visual condition of	. £1	Yes														
satisfactory Flame proving	.	Yes	+		<u> </u>						1				├	
satisfactory Burner lock out ti		Yes			-										<u> </u>	
(seconds) Temp t/stat opera	tion	4			-										<u> </u>	
satisfactory		Yes														
Ventilation Type Mechanical vent /	fluo	N/a	+		+						1				├──	
interlock satisfact	ory	N/a														
level (cm²) Reqd Ventilation F	Jigh	N/a														
level (cm²) Badged Rating (F	Ic\A/	N/a	+		<u> </u>						1				├	
Nett) Actual Ventilation	low	28														
level (cm²) Actual Ventilation I	High	N/a														
level (cm²) Ventilation		N/a	1		1										├──	
Satisfactory		N/a														
Firing Mod Heat input ratin	a	High	Low	High	Low	High	Low	High	Low	High	Low	High	Low	High	Low	High
KW Gas Burner Press	3.37	26.83			-	<u> </u>									<u> </u>	
at Gas Valve Gas Flow Rate	IV/a	N/a	+		1	 		<u> </u>			<u> </u>	<u> </u>		1	<u> </u>	
m³/hr.	0.54	2.70			1	1					1				<u> </u>	
Ambient (Room Temperature (°C	C) 17.2	16.9			1	1					1				<u> </u>	
Flue Gas Tempera	54.2	58.1	 		1	<u> </u>					<u> </u>				<u> </u>	
CO/CO ² Ratio	0.0000	0.0007													<u> </u>	
Oxygen (O²)%	5.5	4	<u></u>			<u></u>					<u></u>				<u> </u>	
Carbon Monoxio (CO) ppm	de 4	72														
Carbon Dioxide (CO²)%	8.81	9.64				1										
Excess	35.1	23.5	1													
Air Gross	88.1	88	+		1	1					1					
Efficiency Is the appliance			+		+	1		<u> </u>		<u> </u>	+	<u> </u>		<u> </u>	\vdash	<u> </u>
safe to use		Safe	<u> </u>		<u></u>		Coo Tierle	itness Tes			<u> </u>					

Gas tightness test Yes carried out (Yes / No)		Total Installation 0 volume (m³))		Max allowable pressure drop (mbar)			Type of gauge used (water / electronic)		Electric			
Where was the Test ECV carried out from?		Let by test duration (mins)		1	l		Volume smallest occupied space (m³)			Smell of gas		No			
Scope of work (e.g. IGE/UP/IB IGE/UP/1 or 1A or 1B)		Stabilisation period 1 (mins)			Tightness pressure ((mbar)					Tightness test result (Pass / Fail)		t Pass			
Installation (New / Existing Existing / Extension)		Tightness test duration (mins)				Actual pressure drop (mbar)		0							
	Meter Information														
Meter Location Externally side of property		Meter room secure		Meter box		Meter roo labelled	m key	Meter box key		Standing pressure at meter (mbar)		23			
Meter size U6		Meter accessible		Yes		meter room ventilated		N/a		Working pressure at meter		19			
ECV labelled No		Does ECV operate easily		Yes		Adequate gas isolation		Yes		Suitably sleeved Area Adjacent Meter		Yes			
coded	Pipework colour No coded /identified rom point of Test		Line diagram at meter (current)		N/a		Clear of combustibles		Yes		Installation cross bonded		Internally where it enters property		
	pe supported e Visible) from of Test								Flue Dilution (CO ₂) %		N/a		Air Sample (CO ₂) %		I/a
	meter Make	Testo		Serial N	lo	N/a		Analyse	er Make	Testo			Serial No	5185	7248
Defects Remedial work required No 1 No directional tape on Ecv Directional tape applied to Ecv															
No 2	Pipe work at rea	r of meter sleeved not	sealed					Requires se	aling						
No 3 No 4															
No 5															
No 6															
No 7															
No 8															
Parts used			Pa				Part Number		Qty		Declaration of Gas that all of the work form has been sati		*		
											in accordance with the current Gas Safety (Installation & Use) regulations, industry standards and procedures.				
industry Standards and procedures.															
Print Name SEAN MOLONEY Engineer's Signature															
The w	ork has been	carried out to my	/ satisfactio	n. I agree	to pay for	all chargea	ble work c	arried out	and the co	st of any pa	rts ordered and	or su	ipplied.		
No person present Print Name Customer Signature No person present				mer Signatu	re										

Tightness Tost Carried out from								
Tightness Test Carried out from this Valve 'Label'								
	Appliance Flue Termination							
	Warning Label 'if Applicable'							

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Photo of Unsafe Situation	Defect 1	Defect 2
		PER STATE OF THE S
Defect 3	Defect 4	Defect 5
Defect 6	Defect 7	Defect 8