

LANDLORD/HOME OWNER'S GAS SAFETY RECORD

This inspection is for gas safety purposes only in accordance with the current edition of the Gas Safety (Installation and Use) Regulations. Flues were inspected visually and checked for satisfactory evacuation of products of combustion. A detailed internal inspection of the flue integrity, construction and lining has not been carried out.

TENANT/HOME OWNER DETAILS

Tenant/Home Owner* Name:	Venus Properties Ltd		
Property Address:	Flat 5 33-39 Marches St Luton		
Post Code	LU1 2PA		
Tel:			
Tenant/Home Owner* present during inspection	☒ YES ☐ NO		

LANDLORD/AGENT DETAILS (if applicable)

Landlord/Agent* Name:	
Address:	
Post Code	
Tel:	
Landlord/Agent* present during inspection	YES/NO

GAS INSTALLER: (Trading Title)	The flue boys and heating		
Name:	Tony Smith	Gas Safe Register No:	686205
Address:	3A Wilson Street	Gas Installer Ref. No :	57434405
Post code:	LU21 1BP	Date of Issue:	07/04/2025
Tel:	07464721900	Time of Issue:	12:15
		Engineers Name: (print)	Tanner

APPLIANCE DETAILS

INSPECTION DETAILS

FLUE TEST

RESULTS

LOCATION	MAKE	MODEL	TYPE	Flue Type e.g. CF or RS	Operating Pressure Mbar	Heat Input Kw	Safety Device Correct Operation Yes/No	Ventilation Adequate Yes/No	CO Alarm fitted Yes/No	CO Alarm tested Pass/Fail	Flue Flow Test Pass/Fail	Spillage Test Pass/Fail	Termination Satisfactory Yes/No	Visual Condition Pass/Fail	Combustion Performance Reading CO: CO2 Ratio / CO2 CO	Appliance Safe To Use Yes/No	Landlord's Appliance Yes/No	Inspected Yes/No
1	Worcester	Bluebird	Boiler	FL	20	6.8kW	Yes	Yes	Yes	NA	NA	NA	NA	Pass	21.7	Yes	Yes	Yes
2	Worcester	Bluebird	Boiler	RS	20	24.13	Yes	Yes	Yes	NA	Pass	Pass	Pass	Pass	9.6 CO2 24.1 ppm 0.00007	Yes	Yes	Yes
3																		
4																		
5																		

DETAILS OF ANY FAULTS

REMEDIAL ACTION TAKEN

DETAILS OF WORK CARRIED OUT

LABEL & WARNING NOTICE ISSUED

1	1																	Yes	NO
2	2																		
3	3																		
4	4																		
5	5																		

Outcome of gas installation pipework visual inspection?

Outcome of gas supply pipework visual inspection?

Is the Emergency Control Valve access satisfactory?

Outcome of gas tightness test?

Is the Protective Equipotential bonding satisfactory?

Pass / Fail / NA
Pass / Fail / NA
Pass / Fail / NA
Pass / Fail / NA
Pass / Fail / NA

This Safety Record is issued by Gas Installer: (SIGNED)

Received on behalf of Landlord / Home Owner: (SIGNED)

Tenant/Landlord/Agent/Home Owner* (SIGNED)

Number of appliances tested: 2

Date: 07/04/2025

ATTENTION

Next safety
check due by:

07/04/2024

to re-order quote code 663010-NUM

Copies: White - Landlord/Agent/Home Owner

Green - Registered Gas Installer

Pink - Tenant

* delete as applicable

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ARCTIC
HAYES
Tools & Consumables