

# LANDLORD/HOME OWNER GAS SAFETY RECORD

Serial No: **P45 1815472**

**REGISTERED BUSINESS DETAILS** Reg No: 144626  
 Gas Engineer: SIM MATTER  
 Gas Safe registered engineer No: 3604508  
 Company: S. MATTER Plumbing & Gas  
 Address: 63 Ballyshelton Park  
Belfast  
 Postcode: BT20 3AS Tel No: 02850 301752

I certify that I carried out inspections on the appliances detailed below.  
 Signed: Shelton Inspection Date: 9/7/2014

**INSPECTION/INSTALLATION ADDRESS**  
 Name & Title: M R T. FRIGUSON  
 Address: FLAT 1 74 CANTONALTA STREET  
Belfast  
 Post Code: \_\_\_\_\_ Tel: \_\_\_\_\_

This inspection is for gas safety purposes only to comply with the Gas Safety (Installation and Use) Regulations. Flues have been inspected visually and checked for satisfactory operation of products of combustion. A detailed internal inspection of the flue integrity, construction and lining has NOT been carried out.

**LANDLORD (OR AGENT) NAME & ADDRESS (if applicable)**  
 Name & Title: BURBRIDGE DUCANN  
 Address: PREMIER LETTING AGENCY  
87A DUNDELA STREET  
BELFAST BT4 3BH  
 Post Code: \_\_\_\_\_ Tel: \_\_\_\_\_  
 Pri: 028-9665-3444

APPLIANCE DETAILS				FLUE TESTS				INSPECTION DETAILS					
Location	Make	Type	Flue type (domestic)	Operable at time of inspection	Flue gas analysis (ppm)	Flue gas analysis (ppm)	Flue gas analysis (ppm)	Flue gas analysis (ppm)	Flue gas analysis (ppm)	Flue gas analysis (ppm)	Flue gas analysis (ppm)	Flue gas analysis (ppm)	Flue gas analysis (ppm)
1	Belfast	100cm	1 mini	CO2	15.5	15.5	15.5	15.5	15.5	15.5	15.5	15.5	15.5
2													
3													
4													
5													

Gas Installation Pipework: Satisfactory/Visual Inspection: Yes  No  Emergency Control Accessible: Yes  No  Satisfactory Gas Tightness Test: Yes  No  Equipment bonding satisfactory: Yes  No  Appliance Safe to Use: Yes/No: YES/NO

**GIVE DETAILS OF ANY FAULTS**

1													
2													
3													
4													
5													

**RECTIFICATION WORK CARRIED OUT**

Number of appliances tested: 1  
 This record is limited by: Signed: Shelton  
 Received on behalf of the Landlord/Home Owner: Signed: \_\_\_\_\_  
 Name: \_\_\_\_\_ Date: 9/7/2014  
 Name: SIM MATTER Date: \_\_\_\_\_  
 Name: \_\_\_\_\_ Date: \_\_\_\_\_