

Details of Registered Business

Gas Safe Register No _____
 Registered Engineer's Name _____
 Gas Safe Register License Number _____
 Business _____
 Address _____
 Postcode _____
 Contact No _____

Details of Site

Name (Mr/Mrs/Miss/Ms) _____
 Address _____
 Postcode _____
 Contact No _____

Details of Landlord/Host

Name (Mr/Mrs/Miss/Ms) _____
 Address _____
 Postcode _____
 Contact No _____

Number of Appliances tested

Outcome of gas installation pipework visual inspection? Pass / Fail / NA
 Outcome of gas supply pipework visual inspection? Pass / Fail / NA
 Is the Emergency Control Valve access satisfactory? Pass / Fail
 Outcome of gas tightness test? Pass / Fail / NA
 Is the Protective Equipotential bonding satisfactory? Pass / Fail

Appliance Details							
	Location of	Type	Manufacturer	Model	Owned by homeowner	Inspected	Type of flue
1							
2							
3							
4							

Inspection Details								
	Operating pressure Pass/Fail/NA	Operation of gas controls Pass/Fail/NA	Visual condition of gas installation Yes/No	Visual condition of flue and termination Pass/Fail/NA	Flue operation checks Pass/Fail/NA	Combustion analysis (if applicable)	Serviced Yes/No	SAFE TO USE Yes/No
1								
2								
3								
4								

Any Defects Identified						
	GIUSP (eg. NCS)	Warning/Advice	Record insert from serial No.			
1						
2						
3						
4						

Remedial Action Taken						
numbering should correspond to defects above.						
1						
2						
3						
4						

Details of Work carried out						
1						
2						
3						
4						

THIS PROPERTY HAS BEEN CERTIFIED AS Ready To Rent

BY A QUALIFIED READY TO RENT ENGINEER

Record issued by: Signature _____
 Print Name _____
 Received by: Signature _____
 Date appliance(s)/flue(s) checked _____

PLEASE NOTE
 This is not a real Gas Safety Certificate and is used as part of the Ready to Rent training only

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