Serial No:
1824153

To confirm the validity of the Registered Gas Engineer please contact Gas Safe on 0800 408 5500 or www.gassaferegister.co.uk

LANDLORD/HOMEOWNER GAS SAFETY RECORD

gasfm.co.uk

This form allows for the recording of results of checks as defined by the Gas Safety (Installation and Use) Regulations. Information recorded on this form does not confirm that the installation was installed by a Gas Safe registered business or that the installation complies with relevant Building Regulations.
Chimney/flue/outlets were visually checked for adequate evacuation of combustion products. A detailed internal inspection has not been undertaken.

DETAILS OF REGISTERED BUSINESS	JOB ADDRESS	LANDLORD/AGENT ADDRESS
Business Name: Varsani constructions ltd	Name:	Name:
Gas Safe Reg. No: 641612	Address: 1 Lorraine Court, Talbot Road Wembley HA0 4UF	Address:
Address: 63 Logan Road Wembley, middx HA9 8PY	Tel. No:	Tel. No:
Tel. No: 07947 51668	Is Accommodation Rented? (Y/N) Yes	No. Of Appliances Tested: 2

Gas Installation Pipework	Satisfactory Visual Condition (Y/N) Yes	Emergency Control Accessible (Y/N) Yes	Satisfactory Gas Tightness Test (Y/N) Yes	Equipotential Bonding Satisfactory (Y/N) Yes

Appliance Details

	Appliance Location	Appliance Make	Appliance Model	Appliance Type	Type of Flue (OF/RS/FL)	Landlords Appliance (Y/N)	Appliance Inspected (Y/N)
1	Kitchen	Main	Compact 30	Boiler	RS	Yes	Yes
2	Kitchen	—	—	Hob	FL	Yes	Yes
3							
4							
5							

Inspection Details

	Operating Pressure in mbar and or Heat Input in KW/Btu/h	Are Safety Devices Working? (Y/N)	Satisfactory Ventilation? (Y/N)	Flue Visual Condition (Pass/Fail/NA)	Flue Performance Checks (Pass/Fail/NA)	Combustion Analyser Reading: CO: CO2 Ratio	Combustion Analyser Reading: CO PPM	Appliance Serviced (Y/N)	Appliance Safe To Use (Y/N)
1	30	Yes	Yes	Pass	Pass	—	9.0	No	Yes
2	7.0	Yes	Yes	NA	NA	—	—	No	Yes
3									
4									
5									

CO Alarm

	Approved CO Alarm Fitted? (Y/N)	Does The CO Alarm Work? (Y/N)
1	Yes	Yes
2	Yes	Yes
3		
4		
5		

	Defect(s) Identified	Warning Advice Issued? (Y/N)	Work Carried Out	Details Of Work Required
1				
2				
3				
4				
5				

Received By:		Issued By: Bhavesh Varsani	ID Card No: 641612	The Next Gas Safety Check Must Be Completed By:
Print Name:	Date:	Signature: B.S	Date: 22/08/25	22/08/26

Top Copy: Agent/Landlord Middle Copy: Tenant Bottom Copy: Engineer To reorder this pad visit www.gasfm.co.uk or call 0800 690 6404 ©GasFM