

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 evacuation of products of combustion. A detailed internal inspection of the flue integrity, construction and lining has NOT been carried out.

REGISTERED BUSINESS DETAILS

Reg No: 528719

Company: P COLLINS PLUMBING & HEATING

Address: 12 PINEWOOD CRESENT
PENYLAN, CARDIFF

Postcode: CF23 9NF

Tel: 07706384669

INSPECTION/INSTALLATION ADDRESS

Name & Title: TENANT

Address: 173 CATMAY TERRACE
CATMAY
CARDIFF

Postcode: CF24 4HL Tel: _____

LANDLORD (OR AGENT) NAME & ADDRESS (if applicable)

Name & Title: LANDLORD PROPERTIES

Address: MILL HOUSE
CULLE BRIDGE MILL
WROXETER RD, HEREFORD

Postcode: HR1 3NA Tel: _____

Number of appliances tested: 1 (ONE)

APPLIANCE DETAILS							FLUE TESTS				INSPECTION DETAILS							
	Location	Make and Model	Type	Flue Type OF/RS/FL	Operating pressure in mbar or heat input kW/h or Btu/h	Safety device(s) correct operation Yes/No/NA	Spillage test Pass/Fail/NA	Smoke pellet flue flow test Pass/Fail/NA	Initial combustion analyser reading	Final combustion analyser reading	Satisfactory termination Yes/No/NA	Flue visual condition Pass/Fail/NA	Adequate ventilation Yes/No	Landlord's appliance Yes/No/NA	Inspected Yes/No	Appliance Visual Check Yes/No	Appliance serviced Yes/No	Appliance Safe to Use Yes/No
1	BATHROOM	GREENSTAR 24i	BURER	RS	22.1kW	YES	PASS	NA	NA	0.0005	YES	PASS	YES	YES	YES	YES	NO	YES
2																		
3																		
4																		
5																		

For appliances not owned by the landlord the recorded 'Appliance Safe to Use' response is based on a visual check for obvious defects only

Gas Installation Pipework: Satisfactory Visual Inspection: Yes ☒ No ☐ Emergency Control Accessible: Yes ☒ No ☐ Satisfactory Gas Tightness Test: Yes ☒ No ☐ Equipotential Bonding Satisfactory: Yes ☒ No ☐

GIVE DETAILS OF ANY FAULTS				RECTIFICATION WORK CARRIED OUT				WARNING NOTICE ISSUED Yes/No/NA	WARNING TAG or LABEL FIXED Yes/No/NA
1									
2									
3									
4									
5									

Approved Audible CO Alarms Fitted & Located Correctly**: Yes ☒ No ☐ N/A ☐ Are CO Alarms in Date: Yes ☒ No ☐ N/A ☐ Testing of CO Alarms Satisfactory: Yes ☒ No ☐ N/A ☐ Smoke/Heat Alarms Located & Fitted correctly**: Yes ☒ No ☐ N/A ☐

OTHER COMMENTS OR OBSERVATIONS

NEXT GAS SAFETY CHECK DUE BEFORE:

29/03/26

ISSUED BY (GAS ENGINEER)

Print Name: PATRICK COLLINS Signed: P. COLLINS

Licence No: 5851054 Issue Date: 13/12/25

RECEIVED BY

Received By: JACILSON JONES (Delete as applicable) Tenant/Agent/Landlord/Home Owner No one present at time of visit ☐

Signed: _____ Print Name: _____