

YOUR LOGO HERE

GAS SERVICE/ MAINTENANCE CHECK LIST

Job No: 

Registered Business Details	Job Address
Company:	Customer:
GAS SAFE card and Licence No:	Name:
Address:	Address:
Postcode: Tel No:	Postcode: Tel No:
Gas tightness test carried out	Rented accommodation
Gas tightness test result	Type of work

APPLIANCE DETAILS	COMMENTS
Type	Appliance - Visit -
Make	
Model	
Location	
Serial Number	

COMBUSTION GAS ANALYSIS INFORMATION			
Initial combustion reading, where applicable		Final combustion reading, where applicable	
CO PPM	CO2%	CO/ CO2 Ratio	

SAFETY CHECKS	YES/ NO/ N/A	REMEDIAL ACTION/ NATURE OF DEFECT
Ventilation satisfactory		
Flue termination satisfactory		
Flue flow test satisfactory		
Spillage test satisfactory		
Safety device(s) satisfactory		
Operating pressure		
Working pressure		

APPLIANCE CHECKS	YES/ NO/ N/A	REMEDIAL ACTION/ NATURE OF DEFECT
Burner / injectors		
Heat exchanger		
Ignition		
Electrics		
Controls		
Gas / Water leaks		
Seals (appliance case etc)		
Gas Pipework/ Connections		
Fan(s)		
Fireplace opening / void		
Closure plate		
Flame picture		
Location		
Stability		
Return air / plenum		

FINDINGS	
Is the appliance / installation safe for use?	
If No, issue a Warning /Advice Notice and attach a Warning Label, insert Serial No.	
The following remedial work is required:	

Gas User signature:	Gas Engineer signature:
Print name: Date:	Print name: