

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

1738865

NON DOMESTIC GAS INSTALLATION SAFETY REPORT



Vulcana
Innovative heat

DETAILS OF REGISTERED BUSINESS

Vulcana Gas Appliances Ltd

Gas Safe Reg. No: 22766

Unit B/1 Horsted Kevnes Industrial Estate, Cinder Hill Lane, Haywards Heath. RH17 7BA

Tel. No: 01444 415 871 Mobile: 07896 242 277

JOB ADDRESS

Name: HOLY TRINITY CHURCH

Address: KILWARDBY STREET

ASHBY DE LA ZOUCH

Tel. No.:

Appliance Details					
	Appliance Type	Appliance Model	Appliance Make	Appliance Location	Type of Flue (OF/RS/FL)
1	GAS HEATER	k55 x 6 th	VULCAN	CHURCH	RS
2	_____	k26	_____	_____	RS
3					
4					

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 (if applicable)		Appliance Safe To Use (Y/N)
						CO: CO2 Ratio	CO PPM	
1	14.0mb	Y	Y	PASS	PASS	SEC	PPM 007	Y
2	13.2mb	Y	Y	PASS	PASS	---	---	Y
3								
4								

Meter Installation		Gas Installation Pipework		
	Yes	No	Yes	No
Is the meter installation accessible?	☒	☐	Is a gas installation line diagram fixed near the primary meter?	☒
Is the meter adequately supported?	☒	☐	Is there a current line diagram of the installation?	☒
Is the ECV accessible?	☒	☐	Are suitable emergency/isolation valves fitted?	☒
Is the ECV fitted with a handle?	☒	☐	Are emergency/isolation valve handles in place and correctly labelled?	☒
Is the ECV labeled with direction of operation?	☒	☐	Is gas pipework satisfactorily supported?	☒
Is the ECV complete with emergency notice?	☒	☐	Is gas pipework in ducts adequately ventilated?	☒
Is the meter room adequately ventilated?	☒	☐	Is gas pipework correctly colour coded/identified?	☒
Is the meter room secure?	☒	☐	Is the installation electrically bonded?	☒
Is the meter room free from clutter / combustibles etc?	☒	☐	Is pipework suitably sleeved and sealed?	☒
Is the meter room lock key clearly labelled?	☒	☐	Has a gas strength/tightness test been carried out?	☒

Received By:	Issued By: <u>Liam Leavelle</u>	ID Card No: <u>5436310</u>
Print Name:	Signature: <u>L Leavelle</u>	Date: <u>3-7-23</u>

Top Copy : Client Bottom Copy: Engineer

To reorder this pad visit www.gasfm.co.uk or call 0800 690 6404

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**The Next Gas Safety Check
Must Be Completed By:**

3 JULY 2024