



COMMERCIAL GAS INSTALLATION SAFETY REPORT

(USE THIS FORM FOR NON-DOMESTIC INSTALLATIONS ONLY)

Report Ref No:

C3C 0257302

REGISTERED BUSINESS DETAILS

Gas Engineer:	Graham Richardson		
Gas Safe Registered Engineer No:			
Company:	M W CRIPWELL	Reg No:	5834236
Address:	119A DEERY STREET		
B.O.T			
Postcode:	DE14 2LE	Tel No:	01283 864269

DECLARATION OF GAS SAFETY

I confirm that all the work described on this form has been satisfactorily completed in accordance with the current Gas Safety (Installation and Use) Regulations, industry standards and procedures. If additional safety checks have been necessary to ensure safety of the gas system, the relevant person has been informed and the results accepted. The engineer has left the installation operational.

Gas Engineer's Signature/
Responsible person's signature:

Date: 14/2/25

INSPECTION/INSTALLATION ADDRESS

Name & Title:	TUKBURY SPORTS PITCH		
Address:	GORMILL LANE TUKBURY		
B.O.T			
Post Code:	DE13 9HA	Tel:	
Issued to (print name):	Graham Richardson	Date:	14/2/25

CUSTOMER'S NAME & ADDRESS (if different from Inspection/Installation)

Name & Title:			
Address:			
Post Code:		Tel:	

APPLIANCE DETAILS

	Location	Make	Model	Type	Flue type OF/RS/FL	Spillage test Pass/Fail/NA	Smoke pellet flue flow test Pass/Fail/NA	Combustion analyser reading (if applicable)	Operating pressure in mbars or kW/h or Btu/h	Safety device(s) correct operation Yes/No/NA	Ventilation provision satisfactory Yes/No	Satisfactory termination Yes/No/NA	Flue visual condition Pass/Fail/NA	Appliance safe to use Yes/No
1	Heater in Room	ANDREWS	6.5/173	Gas Fired boiler	O/F	PASS	N/A	0.0001	50kW	Yes	Yes	Yes	PASS	Yes
2	Heater in Room	ANDREWS	6.5/173	Gas Fired boiler	O/F	PASS	N/A	0.0002	50kW	Yes	Yes	Yes	PASS	Yes
3														
4														
5														

FLUE TESTS

INSPECTION DETAILS

GIVE DETAILS OF ANY FAULTS

RECTIFICATION WORK CARRIED OUT

		WARNING NOTICE ISSUED Yes/No/NA	** WARNING TAG OR STUCK IN/NA	RESPONSIBLE PERSON INFORMED
1				
2				
3				
4				
5				

INSTALLATION PIPEWORK

Is a gas installation line diagram fixed near the primary meter?	Yes	No
Is the gas installation line diagram current?	<input checked="" type="checkbox"/>	
Are adequate emergency/isolation valves fitted?	<input checked="" type="checkbox"/>	
Are emergency/isolation valve handles in place and suitably labelled?	<input checked="" type="checkbox"/>	
Is pipework colour coded/identified?	<input checked="" type="checkbox"/>	
Is the gas installation electrically cross bonded?	<input checked="" type="checkbox"/>	
Is pipework suitably sleeved and sealed as appropriate?	<input checked="" type="checkbox"/>	
Has a gas strength/tightness test been carried out?*	<input checked="" type="checkbox"/>	

*If yes see separate Gas Testing and Purging Certificate (Non-Domestic).

METER INSTALLATION

Is meter installation accessible?	Yes	No
Is the meter room/compartment adequately ventilated?	<input checked="" type="checkbox"/>	
Is the meter room/compartment secure?	<input checked="" type="checkbox"/>	
Is the meter room/compartment clear of combustibles etc?	<input checked="" type="checkbox"/>	
Is the meter room/compartment lock key clearly labelled?	<input checked="" type="checkbox"/>	

** If yes, please refer to separate
Warning/Advice Notice