

Installer Ref No:

CH03504

PLANT COMMISSIONING/SERVICING RECORD (NON-DOMESTIC)

Boil



To confirm the validity of the gas operative please contact Gas Safe Register on Tel: 0800 408 5500

Registered Business: <u>Prime MANWALING LTD</u>	Registration No: <u>1298</u>
Address: <u>UNIT D EASTING CLOS.</u> <u>DORSETTON WAY WORTHING</u>	Operative licence No: <u>4317089</u>
Postcode: <u>BN14 8HQ</u>	Date: <u>27/4/18</u>
Tel No: <u>01903 237522</u>	Print Name: <u>C SCOTT</u>
	Position held: <u>TECHNICIAN</u>

Job address:	Client details if different:
Name: <u>SOUTHERN SIDINGS UNIT B.</u>	Name: _____
Address: <u>90 W STIRLAND LTD</u> <u>SOUTHERN COAST OUCHTERMAN W. SUSSEX</u>	Address: _____
Postcode: <u>PO19 8GR</u> Tel No: _____	Postcode: _____ Tel No: _____
Received by (signature): _____	

Appliance details	No. 1	No. 2	No. 3
Location:	<u>TOP FLOOR CUPBOARD.</u>		
Type:	<u>STORAGE COMBI</u>		
Model:	<u>VIESTMANN VITADEN 222 F</u>		
Serial No:	<u>7570811801018117</u>		
Burner manufacturer (if different):	<u>NO</u>		
Flue type:	<u>RS</u>		

Combustion checks	No.1		No.2		No.3	
	Low	High	Low	High	Low	High
Heat input rating (kW)	<u>32.5</u>	<u>35.0</u>				
Gas burner pressure (mbar)	<u>20.1</u>	<u>17.4</u>				
Gas rate (m³/hr)						
Air/gas ratio control setting	<u>4</u>	<u>7</u>				
Ambient (room) temperature (°C)	<u>18.0</u>	<u>18.0</u>				
Flue gas temperature (°C)	<u>52.3</u>	<u>67.5</u>				
Flue gas temperature net (°C)	<u>52.3</u>	<u>67.5</u>				
Flue draught pressure (mbar)	<u>6.30</u>	<u>6.30</u>				
Oxygen (O₂) %	<u>4.9</u>	<u>5.5</u>				
Carbon Monoxide (CO) ppm	<u>394</u>	<u>66</u>				
Carbon Dioxide (CO₂) %	<u>9.1</u>	<u>8.6</u>				
NOx %						
Excess air %	<u>30.6</u>	<u>34.4</u>				
CO/CO₂ - Ratio	<u>0044</u>	<u>0007</u>				
Gross efficiency %	<u>75.0</u>	<u>78.0</u>				
CO flue dilution ppm						

General safety checks (Yes/No/NA)	
Gas booster(s)/compressor(s) operating correctly?	<u>N/A</u>
Gas installation tightness test carried out (if Yes, see separate form)?	<u>Y</u>
Gas installation pipework adequately supported?	<u>Y</u>
Gas installation pipework sleeved/labelled/painted as necessary?	<u>Y</u>
Chimney system installed in accordance with appropriate standards?	<u>Y</u>
Chimney outlet termination(s) satisfactory?	<u>Y</u>
Fan-flue interlock operating correctly?	<u>N/A</u>

Ventilation type - Natural (go to item 1.) Mechanical (go to item 2.)	
1. Room/boiler room/enclosure low-level free area (cm²)	<u>0.00</u>
high-level free area (cm²)	<u>4.00</u>
Is ventilation satisfactory Yes/No? (if No, see Details of remedial work required)	<u>Y</u>
2. Mechanical ventilation flow rate inlet (m³/s)	<u>N/A</u>
extract (m³/s)	<u>N/A</u>
Mechanical ventilation interlock operating correctly?	<u>N/A</u>
Is ventilation satisfactory Yes/No? (if No, see Details of remedial work required)	<u>Y</u>

Additional checks (Yes/No/NA)	No.1	No.2	No.3
Flue flow test satisfactory?	<u>N/A</u>	<u>N/A</u>	<u>Y</u>
Spillage test satisfactory?	<u>N/A</u>	<u>N/A</u>	<u>Y</u>
Ventilation satisfactory (see also Ventilation type)?	<u>Y</u>	<u>Y</u>	<u>Y</u>
Air/gas pressure switch operating correctly?	<u>Y</u>	<u>Y</u>	<u>Y</u>
Flame proving/safety devices operating correctly?	<u>Y</u>	<u>Y</u>	<u>Y</u>
Burner lock-out time (seconds)	<u>Y</u>	<u>Y</u>	<u>Y</u>
Temperature and limit thermostats operating correctly?	<u>Y</u>	<u>Y</u>	<u>Y</u>
Appliance serviced?	<u>Y</u>	<u>Y</u>	<u>Y</u>

Details of work carried out

Details of remedial work required

Safety Information (Yes/No)	If Warning/Advice Notice issued, insert Serial No*
Has a Warning/Advice Notice been raised?	<u>NON/N/A</u>
Have warning labels been attached?	<u>N/A</u>
Has responsible person been advised?	<u>NO</u>

DECLARATION OF GAS SAFETY - I confirm that all of the above work described on this form has been satisfactorily completed in accordance with the current Gas Safety (Installation and Use) Regulations, standards and procedures.

Gas operative's signature _____

Gas Safe is a registered trade mark of the HSE and is used under licence.

Installer Ref No:

CH03504

PLANT COMMISSIONING/SERVICING RECORD (NON-DOMESTIC)

Book 2



To confirm the validity of the gas operative please contact Gas Safe Register on Tel: 0800 408 5500

Registered Business: <u>King Manufacturing Ltd.</u>	Registration No: <u>1298</u>
Address: <u>UNIT D EASTING CLOSE</u> <u>DOMINION WAY WOODLAND</u>	Operative licence No: <u>4317089</u>
Postcode: <u>BN14 8HQ</u>	Date: <u>27/4/18</u>
Tel No: <u>01903 237522</u>	Print Name: <u>C. SCOTT</u>
	Position held: <u>BENEFIT</u>

Job address:	Client details if different:
Name: <u>Southern Sidings Unit B</u>	Name: _____
Address: <u>90 W STRLAND LTD</u> <u>Southern Gate Chichester</u>	Address: _____
Postcode: <u>PO19 8ER</u> Tel No: _____	Postcode: _____ Tel No: _____
Received by (signature): _____	

Appliance details	No. 1	No. 2	No. 3
Location:	<u>TOP FLOOR Cupboard</u>		
Type:	<u>STORAGE COMBI</u>		
Model:	<u>VISSMANN VIODEN 22015</u>		
Serial No:	<u>7513046507591102</u>		
Burner manufacturer (if different):	<u>NO</u>		
Flue type:	<u>RS.</u>		

Combustion checks	No.1		No.2		No.3	
	Low	High	Low	High	Low	High
Firing mode						
Heat input rating (kW)	<u>8.8</u>	<u>35.0</u>				
Gas burner pressure (mbar)	<u>20.5</u>	<u>19.0</u>				
Gas rate (m³/hr)	<u>/</u>	<u>/</u>				
Air/gas ratio control setting	<u>/</u>	<u>/</u>				
Ambient (room) temperature (°C)	<u>17.0</u>	<u>17.0</u>				
Flue gas temperature (°C)	<u>/</u>	<u>47.9</u>				
Flue gas temperature net (°C)	<u>/</u>	<u>47.9</u>				
Flue draught pressure (mbar)	<u>/</u>	<u>0.0</u>				
Oxygen (O₂) %	<u>6.6</u>	<u>5.6</u>				
Carbon Monoxide (CO) ppm	<u>24</u>	<u>3.6</u>				
Carbon Dioxide (CO₂) %	<u>9.0</u>	<u>8.7</u>				
NOx %	<u>/</u>	<u>/</u>				
Excess air %	<u>29.4</u>	<u>36.6</u>				
CO/CO₂ - Ratio	<u>0.002</u>	<u>0.004</u>				
Gross efficiency %	<u>97.0</u>	<u>97.0</u>				
CO flue dilution ppm	<u>/</u>	<u>/</u>				

General safety checks (Yes/No/NA)		
Gas booster(s)/compressor(s) operating correctly?		<u>N/A</u>
Gas installation tightness test carried out (if Yes, see separate form)?		<u>Y</u>
Gas installation pipework adequately supported?		<u>Y</u>
Gas installation pipework sleeved/labelled/painted as necessary?		<u>Y</u>
Chimney system installed in accordance with appropriate standards?		<u>Y</u>
Chimney outlet termination(s) satisfactory?		<u>Y</u>
Fan-flue interlock operating correctly?		<u>N/A</u>

Ventilation type - Natural (go to item 1.) Mechanical (go to item 2.)		
1. Room/boiler room/enclosure	low-level free area (cm²)	<u>400</u>
	high-level free area (cm²)	<u>400</u>
Is ventilation satisfactory Yes/No? (if No, see Details of remedial work required)		<u>Y</u>
2. Mechanical ventilation flow rate	inlet (m³/s)	<u>N/A</u>
	extract (m³/s)	<u>N/A</u>
Mechanical ventilation interlock operating correctly?		<u>N/A</u>
Is ventilation satisfactory Yes/No? (if No, see Details of remedial work required)		<u>Y</u>

Additional checks (Yes/No/NA)	No.1	No.2	No.3
Flue flow test satisfactory?	<u>N/A</u>		
Spillage test satisfactory?	<u>N/A</u>		
Ventilation satisfactory (see also Ventilation type)?	<u>Y</u>		
Air/gas pressure switch operating correctly?	<u>Y</u>		
Flame proving/safety devices operating correctly?	<u>Y</u>		
Burner lock-out time (seconds)	<u>Y</u>		
Temperature and limit thermostats operating correctly?	<u>Y</u>		
Appliance serviced?	<u>Y</u>		

Details of work carried out

Details of remedial work required

Safety Information (Yes/No)	
Has a Warning/Advice Notice been raised?	<u>NO</u>
Have warning labels been attached?	<u>NO</u>
Has responsible person been advised?	<u>NO</u>

DECLARATION OF GAS SAFETY - I confirm that all of the above work described on this form has been satisfactorily completed in accordance with the current Gas Safety (Installation and Use) Regulations, standards and procedures.

Gas operative's signature: _____

Installer Ref No:

CH03504

PLANT COMMISSIONING/SERVICING RECORD (NON-DOMESTIC)

Block 3.



To confirm the validity of the gas operative please contact Gas Safe Register on Tel: 0800 408 5500

Registered Business: <u>Pain MANUFACTURING LTD</u>	Registration No: <u>1298</u>
Address: <u>UNIT D EASTING CLOSE</u> <u>DOMINION WAY WOLLEY</u>	Operative licence No: <u>4317089</u>
Postcode: <u>BN14 8HQ</u>	Date: <u>27/4/18</u>
Tel No: <u>01903 237522</u>	Print Name: <u>C. SCOTT</u>
	Position held: <u>ENGINEER</u>

Job address:	Client details if different:
Name: <u>Southern SIDINGS UNIT B.</u>	Name: _____
Address: <u>96 W STIRLAND LTD</u> <u>Southern GATE CHICHESTER</u>	Address: _____
Postcode: <u>PO19 8ER</u> Tel No: _____	Postcode: _____ Tel No: _____
Received by (signature): _____	

Appliance details	No. 1	No. 2	No. 3
Location:	<u>TOP FLOOR COPRND.</u>		
Type:	<u>Balm</u>		
Model:	<u>VISSMAN X1 VIRESH 221</u>		
Serial No:			
Burner manufacturer (if different):			
Flue type:			

Combustion checks	No.1		No.2		No.3	
	Low	High	Low	High	Low	High
Appliance No.						
Firing mode						
Heat input rating (kW)	<u>8.8</u>	<u>35.0</u>				
Gas burner pressure (mbar)	<u>19.3</u>	<u>16.2</u>				
Gas rate (m³/hr)						
Air/gas ratio control setting						
Ambient (room) temperature (°C)	<u>18.0</u>	<u>18.0</u>				
Flue gas temperature (°C)	<u>54.2</u>	<u>70.5</u>				
Flue gas temperature net (°C)	<u>54.2</u>	<u>70.5</u>				
Flue draught pressure (mbar)	<u>0.30</u>	<u>0.30</u>				
Oxygen (O₂) %	<u>16.6</u>	<u>14.8</u>				
Carbon Monoxide (CO) ppm	<u>75</u>	<u>135</u>				
Carbon Dioxide (CO₂) %	<u>9.3</u>	<u>9.1</u>				
NO _x %						
Excess air %	<u>28.2</u>	<u>24.9</u>				
CO/CO₂ - Ratio	<u>0.005</u>	<u>0.014</u>				
Gross efficiency %	<u>95.0</u>	<u>97.0</u>				
CO flue dilution ppm						

General safety checks (Yes/No/NA)	
Gas booster(s)/compressor(s) operating correctly?	<u>N/A</u>
Gas installation tightness test carried out (if Yes, see separate form)?	<u>Y</u>
Gas installation pipework adequately supported?	<u>Y</u>
Gas installation pipework sleeved/labelled/painted as necessary?	<u>Y</u>
Chimney system installed in accordance with appropriate standards?	<u>Y</u>
Chimney outlet termination(s) satisfactory?	<u>Y</u>
Fan-flue interlock operating correctly?	<u>N/A</u>

Ventilation type - Natural (go to item 1.) Mechanical (go to item 2.)	
1. Room/boiler room/enclosure	low-level free area (cm²) <u>400</u>
	high-level free area (cm²) <u>400</u>
Is ventilation satisfactory Yes/No? (if No, see Details of remedial work required)	<u>Y</u>
2. Mechanical ventilation flow rate	inlet (m³/s) <u>N/A</u>
	extract (m³/s) <u>N/A</u>
Mechanical ventilation interlock operating correctly?	<u>N/A</u>
Is ventilation satisfactory Yes/No? (if No, see Details of remedial work required)	<u>Y</u>

Additional checks (Yes/No/NA)	No.1	No.2	No.3
Flue flow test satisfactory?	<u>N/A</u>		
Spillage test satisfactory?	<u>N/A</u>		
Ventilation satisfactory (see also Ventilation type)?	<u>Y</u>		
Air/gas pressure switch operating correctly?	<u>Y</u>		
Flame proving/safety devices operating correctly?	<u>Y</u>		
Burner lock-out time (seconds)	<u>Y</u>		
Temperature and limit thermostats operating correctly?	<u>Y</u>		
Appliance serviced?	<u>Y</u>		

Details of work carried out

Details of remedial work required

Safety Information (Yes/No)	If Warning/Advice Notice issued, insert Serial No*	
Has a Warning/Advice Notice been raised?	<u>NO</u>	<u>NO</u>
Have warning labels been attached?	<u>NO</u>	
Has responsible person been advised?	<u>Y</u>	

DECLARATION OF GAS SAFETY - I confirm that all of the above work described on this form has been satisfactorily completed in accordance with the current Gas Safety (Installation and Use) Regulations, standards and procedures.

Gas operative's signature _____

Key: Top Copy - Responsible person. Second Copy - Gas Operative

* Refer to separate Warning/Advice Notice

To re-order quote Ref. CP15

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