




 <p>EST 1894</p> <p><b>J. Scott &amp; Sons Ltd</b></p> <p>Unit 8, 97-101 Peregrine Road Hainault, Essex, IG6 3XH T: 020 8500 4736 E: service@jss.limited</p>     	DATE	JOB NUMBER
	05/08/2024	104968
	CUSTOMER REFERENCE	
	Chris	
	TRAVEL TIME	TIME ON SITE
1 1/4 Hours	4 1/2 Hours	
CUSTOMER	ARRIVAL TIME	DEPARTURE TIME
Chester House	13:45	17:15
SITE	LOCATION	
Guy Chester Centre	Boiler room	

**ENGINEER REPORT**

ASSET #	MAKE	MODEL	SERIAL NUMBER	PNC	TYPE


Arrived on site to carry out full service to lochinvar water heaters x 2 and 3 x lochinvar boilers and supply gas safety test to all applicants

QTY	PARTS USED

ADDITIONAL ENGINEERS	
NAME	GAS SAFE

FURTHER WORKS	
QTY	PARTS REQUIRED
ENGINEER'S REQUIRED	TIME REQUIRED

Photo 1	Photo 2	Photo 3

ENGINEER'S SIGNATURE	ENGINEER'S NAME	PARKING	CONGESTION
	Darren Hart	£0.00	NO
CUSTOMER'S SIGNATURE	ENGINEER'S GAS SAFE NUMBER	TOLL	SUNDRIES
	5643396	NO	NO
	CUSTOMER'S NAME	JOB COMPLETE	
	..	YES	
	CUSTOMER'S EMAIL	QUOTED WORKS	
		NO	



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DATE	JOB NUMBER
05/08/2024	104968
CUSTOMER REFERENCE	
Chris	
DOCUMENT UID	
863d5355-7d0e-4aef-a7a7-84d843a67096	

DETAILS OF CUSTOMER (IF DIFFERENT TO SITE)		DETAILS OF SITE	
Name	Chester House	Name	Guy Chester Centre
Address		Address	Chester House, London
Postcode	Contact No. 020 8310 0692	Postcode	N10 1PR Contact No. 020 8883 8204

**CP17 - GAS SERVICING/COMMISSIONING RECORD (NON-DOMESTIC)** Gas Safe Register Licence Number **7707**

APPLIANCE INFORMATION	APPLIANCE 1	APPLIANCE 2
Location	Boiler room	Boiler room
Type	Water heater	Water heater
Make	Lochinvar	Lochinvar
Model	Ech 52 370 ce	Ech 52 370 ce
Serial Number	163105962604002	1950006856706002
Flue Type	Power Flue	Power Flue

DETAILS OF PERSONS	
Gas Engineer's Name	
Darren Hart	
Gas Engineer's Register Licence Number	
5643396	
Responsible Person's Name	
Chris	

APPLIANCE CHECKS	APPLIANCE 1	APPLIANCE 2
Flue flow test	PASS	PASS
Spillage test	PASS	PASS
Ventilation Satisfactory	YES	YES
Air/gas pressure switch operating correctly?	YES	YES
Flame proving/safety devices operating correctly	YES	YES
Burner lock-out time (seconds)	0	0
Temperature and limit thermostats operating correctly?	YES	YES
Appliance serviced	YES	YES

SAFETY INFORMATION	
Has a warning or advice record been issued?	N/A
Have warning labels been affixed?	N/A
Has a responsible person been advised?	N/A
Warning/Advice serial #	

COMBUSTION CHECKS	APPLIANCE 1		APPLIANCE 2		
	Firing Mode	Low	High	Low	High
Heat input rating (kW)		47.8		47.8	
Gas burner pressure (mbar)		16.9		16.9	
Gas rate (m <sup>3</sup> /hr)		.	.	.	.
Air/Gas ration control setting		.	.	.	.
Ambient (room) temperature (°C)		29		29	
Flue gas temperature (°C)		55		52	
Flue gas temperature net (°C)		26		23	
Flue draught pressure (mbar)		.		.	
Oxygen (O <sub>2</sub> ) %		5.9		5.6	
Carbon Monoxide (CO) ppm		8		4	
Carbon Dioxide (CO <sub>2</sub> ) %		8.5		8.7	
NO <sub>x</sub> %		.		.	
Excess air %		39.5		36.9	
CO/CO <sub>2</sub> - Ratio		0.0001		0.0000	
Gross efficiency %		88.8		90.6	
CO flue dilution ppm		.		.	

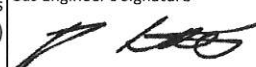
VENTILATION TYPE & CHECKS		
Non room sealed appliances		
Natural Ventilation		
Ventilation size	High-level free area (cm <sup>2</sup> )	.
	Low-level free area (cm <sup>2</sup> )	-
Mechanical Ventilation		
Flow rate	Inlet (m <sup>2</sup> /s)	
	Outlet (m <sup>2</sup> /s)	
Interlock fitted		
Interlock operating correctly		
Room sealed appliances		


SUPPORTING CHECKS	APPLIANCE 1	APPLIANCE 2
Gas booster(s)/compressor(s) operating correctly?	N/A	N/A
Gas installation tightness test carried out?	YES	YES
Gas installation pipework adequately supported?	YES	YES
Gas installation pipework sleeved/labelled as necessary?	YES	YES
Flue system installed in accordance with appropriate standards?	YES	YES
Flue Termination(s) satisfactory?	YES	YES
Fan-flue interlock operating correctly?	YES	YES

DETAILS OF WORK DONE	
Service to all boilers and water heaters and test all pumps and controls	

DETAILS OF WORK REQUIRED	

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

Gas Engineer's Signature  


Responsible Person's Signature  


**ATTENTION** Next safety check due by: 5/08/2025



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Address		Address	Chester House, London
Postcode		Postcode	N10 1PR
Contact No.	020 8310 0692	Contact No.	020 8883 8204

**CP17 - GAS SERVICING/COMMISSIONING RECORD (NON-DOMESTIC)**

Gas Safe Register Licence Number  
**7707**

APPLIANCE INFORMATION	APPLIANCE 3		APPLIANCE 4		APPLIANCE 5		APPLIANCE 6	
Location	Boiler room		Boiler room		Boiler room			
Type	Boiler		Boiler		Boiler			
Make	Lochinvar		Lochinvar		Lochinvar			
Model	Cpm 175		Cpm175		Cpm175			
Serial Number	0142850000653517		01428500010002919		0142850001114220			
Flue Type	Power Flue		Power Flue		Power Flue			
APPLIANCE CHECKS	APPLIANCE 3		APPLIANCE 4		APPLIANCE 5		APPLIANCE 6	
Flue flow test	PASS		PASS		PASS			
Spillage test	PASS		PASS		PASS			
Ventilation Satisfactory	YES		YES		YES			
Air/gas pressure switch operating correctly?	YES		YES		YES			
Flame proving/safety devices operating correctly	YES		YES		YES			
Burner lock-out time (seconds)	0		0		0			
Temperature and limit thermostats operating correctly?	YES		YES		YES			
Appliance serviced	YES		YES		YES			
COMBUSTION CHECKS	APPLIANCE 3		APPLIANCE 4		APPLIANCE 5		APPLIANCE 6	
	Low	High	Low	High	Low	High	Low	High
Heat input rating (kW)	166	184	166	184	166	184		
Gas burner pressure (mbar)	16.9	14.7	16.7	14.8	16.7	14.7		
Gas rate (m <sup>3</sup> /hr)	.	.	.	.	.	.		
Air/Gas ration control setting	.	.	.	.	.	.		
Ambient (room) temperature (°C)	30	30	30	30	31	31		
Flue gas temperature (°C)	38	71	30	51	43	59		
Flue gas temperature net (°C)	8	41	7	21	12	28		
Flue draught pressure (mbar)	.	.	.	.	.	.		
Oxygen (O <sub>2</sub> ) %	5.3	5.9	6.1	5.6	6.2	4.3		
Carbon Monoxide (CO) ppm	13	58	10	86	11	91		
Carbon Dioxide (CO <sub>2</sub> ) %	8.9	8.5	8.4	8.7	8.4	9.5		
NO <sub>x</sub> %	.	.	.	.	.	.		
Excess air %	34.2	39.7	41.3	37.1	41.7	25.7		
CO/CO <sub>2</sub> - Ratio	0.0001	0.0007	0.0001	0.0010	0.0001	0.0010		
Gross efficiency %	96.2	88.1	96.2	91.0	94.5	88.8		
CO flue dilution ppm	.	.	.	.	.	.		
SUPPORTING CHECKS	APPLIANCE 3		APPLIANCE 4		APPLIANCE 5		APPLIANCE 6	
Gas booster(s)/compressor(s) operating correctly?	N/A		N/A		N/A			
Gas installation tightness test carried out?	YES		YES		YES			
Gas installation pipework adequately supported?	YES		YES		YES			
Gas installation pipework sleeved/labelled as necessary?	YES		YES		NO			
Flue system installed in accordance with appropriate standards?	YES		YES		YES			
Flue Termination(s) satisfactory?	YES		YES		YES			
Fan-flue interlock operating correctly?	YES		YES		YES			

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

Gas Engineer's Signature

Responsible Person's Signature

**ATTENTION**

Next safety check due by: 5/08/2025