## COMMERCIAL SERVICING/COMMISSIONING RECORD (USE THIS FORM FOR NON-DOMESTIC INSTALLATIONS ONLY)

Serial No:

M0016877

REGISTERED BUSINESS [	DETAIL:	S					Reg No: 647087			DECLARATION OF GAS SAFETY									
Gas Engineer:	Robert	Freeth							I con	firm that a	all the wo	rk descri	oed on this form has b	een satisfacto	rilv comple	eted in acc	cordance with	the current	
Gas Safe Registered Engineer No: 5069427												) Regulations, industr							
Company:	any: Core Technical Facilities Ltd											Gas Engineers Signature:							
Address:	Buchar	nan Towe	r, Bucha	ınan Bus	iness Pa	ark, Cumb	ernauld Road			Date: 18/02/2025									
Postcode:	G33 6HZ Te					Tel: 0870 241 6697							7 6			-			
INSPECTION/INSTALLATION	RESS							CUS	CUSTOMER'S NAME & ADDRESS (if different from Inspection/Installation)										
Name & Title:													Ryder						
Address:	Thorne	Hall, Lor	nathorne					—	-			Floor, Kings House,, King Street							
Postcode:	PE3 6L		iguioipo		Tel:				oury, Suffo	olk		, 5,							
Date:		2025 14:3	31			<u></u>				code:		CO1	110 2ED Tel:						
									2										
APPLIANCE DETAILS						1						2				3			
Location:						West wing plantroom													
Туре:							Ideal heati												
Model:						EVOMAX 80													
Serial No:							ZA 205960												
Burner manufacturer (if different):							Ideal												
Flue type:							Balance												
COMBUSTION CHECKS						ADDITIONAL CHECKS (Yes/No/NA)					2	3	GENERAL SAFETY CHECKS (Yes/No/NA)						
Appliance No.		1	2 3 Flue flow test satisfactory					Yes			Gas booster(s)/compressor(s) operating correctly?					N/A			
Firing Mode	Low	High	Low	High	Low	High	Spillage test satisfactory			Yes			Gas installation tightness test carried out?					No	
Heat input rating k/w	80	80					Ventillation satisfactory			Yes			, and the second						
Gas burner pressure (mbar)	Na	Na					Air/gas pressure switch operating correctly			Yes			Gas installation pipework adequately supported?					Yes	
Gas rate (m^3/hr)	Na	Na					Flame proving/safety devices operating correctly			Yes			Gas installation pipe	work sleeved/	labelled/pa	ainted as r	necessary?	Yes	
Air/gas ratio control setting	?	?					Burner lock-out	t time		N/A			Flue system installe	d in accordance	e with app	ropriate s	tandards?	Yes	
Ambient (room) temperature	15	15					Temperature a	nd limit thermostats operating	correctly	Yes			Flue termination(s) satisfactory?					Yes	
Flue gas temperature (°C)	45.1	69					Appliance serv		Yes										
Flue gas temperature net (°C)	19.1	29.3					Condensate Di		Yes			Fan-flue interlock operating correctly?					N/A		
Flue draught pressure (mbar)	Na	Na					SAFETY INF					VENTILATION TYPE: Natural - 1 Natural / 2 Mechanical							
Oxygen (O2) %	6.7	5.2					Has a Warning		N/A			Plant room/compartment ventilation - low-level free area (cm²)							
Carbon Monoxide (CO) ppm	8ppm	37ppm					Have warning I		N'		N/A	- high-level free area (cm²)							
Carbon Dioxide (CO2) %	8.1%	8.9%					Has responsibl	e person been advised?			N/A			es clear and unobstructed?				Yes	
NOx %	Na	Na					DETAILS OF	REMEDIAL WORK REQ	UIRED	D			ı -					163	
Excess air %	46.8	33					Na						2. Mechanical ventilation flow rate - inlet (m³/s)						
CO/CO2 - Ratio	0.0001	0.0004											- extract (m³/s)					1	
Gross efficiency %	98.3	98.3						WORK DONE					Mechanical ventilation interlock operating correctly?					N/A	
CO flue dilution ppm	8ppm	37ppm	l	I	I	1	Service				All ventilation grilles clear and unobstructed?							N/A	