Serial No
LAB 049864

COMMERCIAL CATERING INSPECTION RECORD PART A

Registered Business/engineer details can be checked at www.gassaferegister.co.uk or by calling 0800 408 5500

GAS safe REGISTER

☑ TICK BOXES AS APPROPRIATE

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Details of Registered Business

Gas Safe Register No 10144
Registered Engineer's Name S SOMERSET.
Gas Safe Register Licence Number 5433982
Business SGS HEATING & ELECTRICAL LTD
Address 4 DOLPHIN INDEST, SOUTHAMPTON RD, SALISBURY. WILTS.
Postcode SP1 2NB
Contact No 01722 331066
Email Address
Web Address

Details of Site

Name (Mr/Mrs/Miss/Ms)
Address CUCKOO CAFE
2 SILVER ST
WILTON
SALISBURY. WILTS.
Postcode SP2 0HX
Contact No 01722 744002
Email Address
Web Address

Details of Landlord (or agent where appropriate)

Name (Mr/Mrs/Miss/Ms)
Address
Postcode
Contact No

Gas installation details

Emergency Isolation for Catering area provided?	Yes ☑ No ☐
If yes - location satisfactory?	Yes ☑ No ☐
If yes - is it accessible?	Yes ☑ No ☐
If yes - is valve of suitable type?	Yes ☑ No ☐
If yes - is valve handle secured in place?	Yes ☑ No ☐ N/A ☐
Is a Gas Emergency Notice present?	Yes ☑ No ☐
Is gas isolation provided via an auto electric system?	Yes ☑ No ☐
If yes - is the system fitted with automatic pressure proving?	Yes ☐ No ☐ N/A ☑
If yes - do all appliance burners have flame safeguards?	Yes ☐ No ☐ N/A ☑
Alternatively, is the system manually reset?	Yes ☐ No ☐ N/A ☑
If yes - is there attached a notice regarding resetting?	Yes ☐ No ☐ N/A ☑
Is there any evidence of corrosion of gas pipework?	Yes ☐ No ☑
If yes - detail any action required	
Has the gas installation been tightness tested?	Yes ☑ No ☐
If yes - is the gas installation tightness satisfactory?	Yes ☑ No ☐
Detail remedial work required to resolve any shortcomings on Part B	

Pipework within the catering area

Are the correct materials in use?	Yes ☑ No ☐
Is the pipework correctly identified / labelled?	Yes ☑ No ☐
Is pipework correctly supported throughout?	Yes ☑ No ☐
Are pipe sleeves extended through walls/floors etc?	Yes ☑ No ☐ N/A ☐
Suitable purge points fitted?	Yes ☐ No ☐ N/A ☑
Suitable test points fitted?	Yes ☑ No ☐ N/A ☐
Electrical protective bonding fitted where required?	Yes ☑ No ☐ N/A ☐
Detail remedial work required to resolve any shortcomings on Part B	

Safety information

		If Warning Notice issued insert Classification and Serial No.
Has a Warning Notice been issued	Yes ☐ No ☑	Classification
Have Warning Labels been affixed?	Yes ☐ No ☐	ID ☐ AR ☐ N/A ☐
Has a responsible person been advised?	Yes ☐ No ☐	Serial No:

Ventilation/extract and air quality systems

Is a canopy system installed?	Yes ☑ No ☐ N/A ☐
If yes – is the canopy overhang correct?	Yes ☐ No ☑
Record type of filtration (e.g. mesh/baffles/UV)	BAFFLES
Filtration adequately maintained?	Yes ☑ No ☐
Mechanical extract provided?	Yes ☑ No ☐
If yes - what is the flow rate in litres/sec?	5400 l/s
If yes - is flow rate adequate?	Yes ☑ No ☐
Is mechanical extract interlocked with gas supply?	Yes ☑ No ☐
Is interlock fitted with manual override?	Yes ☐ No ☑ N/A ☐
If yes - override disabled?	Yes ☐ No ☐ N/A ☑
If no, written report provided advising against use?	Yes ☐ No ☐ N/A ☑
Mechanical ventilation fitted?	Yes ☐ No ☑
If yes - what is the flow rate in litres/sec?	l/s
If yes - is flow rate adequate?	Yes ☐ No ☐ N/A ☑
If yes - mechanical ventilation interlock provided?	Yes ☐ No ☐ N/A ☑
If yes - does the interlock work correctly?	Yes ☐ No ☐ N/A ☑
Where required Is natural ventilation provided?	Yes ☑ No ☐ N/A ☐
If provided give details High Level 170 cm² Low Level 170 cm²	Adequate? Yes ☑ No ☐ N/A ☐
Are adequate notices regarding ventilation provided?	Yes ☐ No ☐ N/A ☑
Automatic means of CO_2 detection provided?	Yes ☐ No ☑
If yes - is CO_2 detection interlocked with gas supply?	Yes ☐ No ☐ N/A ☑

Air Quality Testing (in accordance with IGEM/UP/19)
Average of 3 CO_2 levels recorded within work area(s) during visit (refer to IGEM/UP/19)

First CO_2 reading:	691 ppm (1)	
Second CO_2 reading:	917 ppm (2)	
Third CO_2 reading:	1970 ppm (3)	
Average of above 3 readings:	(1 + 2 + 3) ÷ 3	1192 ppm

Results of Air Quality Testing - Acceptable ☑ Not Acceptable ☐

Details of CO_2 recording instrument:
Make/model KANE 458S AAQ Calibration date 10/05/24

Detail remedial work required to resolve any shortcomings on Part B

Risk analysis of kitchen ventilation/extract system

Has risk assessment in accordance with IGEM/UP/19 been applied?	Yes ☑ No ☐ N/A ☐
If applicable what is the outcome of the Risk Assessment?	Satisfactory ☑ Not Satisfactory ☐

Declaration of Gas Safety – I confirm that this record is a true and accurate representation of the gas work carried out on the day of inspection. Relevant and appropriate duty-holders are required to ensure that gas appliances, installation pipework, ventilation and extract systems are maintained in a safe condition so as to prevent the risk condition of injury to any person.

Gas Safe Registered Engineer's signature:
Date: 26/09/23

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