

On The Job Portfolio **Training Centre Portfolio** **(Tick)** Job Number: _____

Trainee Name: _____ Date: _____ Hours: _____

Job Address: _____

Work Type: Service Install Repair other

Gas Pipework: Visual Inspection Pass Tightness Test Pass Meter Type _____

Meter Pressure: Standing Pressure _____ mb Working Pressure _____ mb Pass Fail

Appliance Make / Model / Type: _____

Fitted in Location / Position: _____

Flue Type: Open R/Sealed Flueless Visual Inspection Pass Fail

Flue Material and Manufacturer: _____

Flue Test: N/A Pass Fail Spillage: Pass Fail

Ventilation: N/A Calculated Size: _____ cm² Vent Size: _____ cm²

Operating / Burner Pressure: Inlet Pressure _____ mb Burner Pressure _____ mb

Heat Input / Gas Rate Calculation: _____

Manufacturers Max HI or GR Value: _____ Manufacturers Max Gas Analysis Ratio or CO₂: _____

High Fire or Oven FGA _____ Co₂ _____ Co _____ Pass Fail

Low Fire or Grill FGA _____ Co₂ _____ Co _____ Pass Fail

Flue Integrity Test CO _____ O₂ _____ N/A Pass Fail

Visual inspection of Flames N/A Pass Fail

Safety Controls: FSD Type and test time: _____

ASD Regulator Thermostat Multi Funcion Control

Gas Taps Solenoids Igniters Fan Pressure Switch

Lid Safety Device Cooker Thermostat Bypass Other

Is the appliance safe for continued use? Private Landlord Other

Detail of Work Carried Out: Photograph Code Numbers ** _____

Actions Taken, as a result of defects found:

Unsafe Category Used? **ID / AR / NCS**
 Has the appliance been labeled? YES / NO
 Turned Off or Capped Off? T.Off / C.Off
 Form filled in and signed YES / NO
 Has HSE / RIDDOR been Contacted YES / NO

Give Detail:

Gas Safe Engineer Name: _____ Engineer's Signature: _____

Engineer Registration Number _____ Date Completed: _____

Trainee Signature _____ Training Centre Checked by: _____

** Please take and attach photographs of the work undertaken. Code the photos and include in Details of work