

# HEATING SYSTEM CERTIFICATION

**Contractors Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**THIS IS TO CERTIFY THAT A QUALIFIED TECHNICIAN EMPLOYED BY THIS FIRM HAS CAREFULLY INSPECTED THE HEATING SYSTEM OF THE DWELLING LOCATED AT:**

**Inspected Address:** \_\_\_\_\_

- ( ) Tested existing heating unit under operating conditions for worn, defective and missing parts; including all lines, ducts, thermostats, fuel tank, convectors, radiators, valve, grilles, gauges, registers, fitting, dampers, and flue. Checked for gas leaks (Carbon monoxide and sulphur dioxide). Flue meets code and clearance requirements for this type of heating unit.
- ( ) The system is properly installed and is in good and safe operating condition, and with normal maintenance it is reasonably expected to continue to do so. The system is capable of providing at least 68 degrees inside temperature when outside is at zero degrees.

**ALL SYSTEMS SHALL BE LEFT PROTECTED AGAINST FREEZING IF THE HEATING SYSTEM WILL BE DE-ACTIVATED UPON CONCLUSION OF THE TESTS.**

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- ( ) Check here if the above system was not in good and safe operating condition at the time of the inspection and itemize below all parts and/or replacements which were necessary to put it in good and safe operating condition, including any repairs of the system.

## ITEMS

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*I further certify that I have no interest, present or prospective, in the property, buyer, seller, broker, mortgagee or other party involved in the transaction. I further certify that I am authorized to execute this certification on behalf of the company listed below.*

**COMPANY:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_ **PRINT NAME:** \_\_\_\_\_

**LICENSE NO.: (REQUIRED)** \_\_\_\_\_ **SEAL**