

Benoure Plumbing & Heating, Inc.

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34 Commerce Avenue  
S. Burlington, VT 05403  
Phone 802-864-7156  
Fax 802-864-7167

Date of Inspection:  
8 21 08

## Heating and Venting System Documentation Form

Name of Owner of Inspected Unit: GARY AND CHRISTINA KAMINSKY

Address of Inspected Unit: 125 South Cove Rd BURLINGTON Unit # \_\_\_\_\_

**Heating System(s) Type:**  
*(Check all that Apply)*

- Space Heater
- Warm Air Furnace
- Wall Mount Furnace
- Boiler
- Gas Fireplace
- Other

**Fuel Type:**

- Natural Gas
- Oil KEROSENE
- Propane

**Venting System(s):**  
*(Check all that Apply)*

- Direct Vent
- B-Vent
- Masonry \*
- Other

\*All masonry chimneys lined or unlined need to be inspected by qualified chimney sweep

Model # of Boiler/Furnace/Fireplace: ToyoStove Laser 73

Location of Heating System: Livingroom

System Passed     System Failed    If System Failed, Next Annt: 1

Company Conduction Inspection:  
**Benoure Plumbing & Heating, Inc.**

Person Conducting Inspection:  
*(Please Print)*  
Daniel Crossman

Licensure for plumbing & heating?  
 Yes     No License #: PM-3945

Certification for gas equipment?  
 Yes     No Cert #: GN-2081

I have inspected the heating and venting system (s) and certify that it is/they are installed properly and is/are operating safely at this time.

Signature of Inspector: [Signature]

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

C125 1.3

TEST 28  
DATE 08/21/08  
TIME 14:26:23

125 S. Cove Rd

COMBUSTION Boiler

FUEL	L	OIL
O2 %	21.1	
CO2 %	-0>	
CO PPM	08	
FLUE °F	139.9	
INLT °F	80.5	
NETT °F	59.4	

EFF (G)	-0>
LOSSES	-0>
XAIR %	-0>

CO/CO2 0.0000  
CO AIR FREE -0>

PRS hPA 0.04

**KAMINSKY**  
Customer  
ToyoStove  
Appliance  
Laser 73  
Ref.