

Benoure Plumbing & Heating, Inc.
34 Commerce Avenue
S. Burlington, VT 05403
Phone 802-864-7156
Fax 802-864-7167

Date of Inspection:
12 / 5 / 12

Heating and Venting System Documentation Form

Name of Owner of Inspected Unit: GENE RICHARD

Address of Inspected Unit: 34 BULL STREET 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
- 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: YORK AFFINITY

Location of Heating System: BASEMENT

System Passed System Failed If System Failed, Next Appt: / /

Company Conduction Inspection:
Benoure Plumbing & Heating, Inc.

Person Conducting Inspection:
(Please Print)
 Scott Gagnon

Licensure for plumbing & heating?

Yes License #: PM-3563

Certification for gas equipment?

Yes Cert #: GB-922

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: Scott Gagnon

Comments: 2. 16x25 x 1

1. VENT TAG FURNACE

1. VENT TAG GAS

WATER HEATER

C125 1.3

DATE: 12/05/12
 TIME: 10:46:16

FUEL: Nat Gas

COMBUSTION

LOG: 02

O2 %: 13.7

CO2 %: 4.1

CO PPM: 14

FLUE °F: 89.3

INLT °F: 54.2

NETT °F: 35.1

EFF (G): 93.0

LOSSES: 11.7

XAIR %: 190.3

CO/CO2: 0.0003

CO AIR FREE: 40

PRS inH2O: -0.05

Customer: _____

Appliance: _____

Ref.: _____