

Benoure Plumbing & Heating, Inc. TAG# 18386

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

Date of Inspection:
12 / 7 / 12

Heating and Venting System Documentation Form

Name of Owner of Inspected Unit: GENE RICHARDS
 Address of Inspected Unit: 361 FERRIS Unit # 1

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: WEIL MCLAIN WATER
 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: _____

C125 1.3

DATE 12/07/12
 TIME 06:18:33
 FUEL Nat Gas
 COMBUSTION
 LOG 01
 O2 % 4.9
 CO2 % 9.1
 CO PPM 31
 FLUE "F 124.2
 INLT "F 64.1
 NETT "F 60.1
 EFF (G) 91.2
 LOSSES 11.5
 XAIR % 30.6
 CO/CO2 0.0003
 CO AIR FREE 40
 PRS inH2O 0.01

Customer: _____
 Appliance: _____
 Ref: _____

Benoure Plumbing & Heating, Inc. TAG# 18381

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Date of Inspection:
12 / 9 / 12

Heating and Venting System Documentation Form

Name of Owner of Inspected Unit: GENE RICHARDS
 Address of Inspected Unit: 361 PEARL Unit # 2

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: WEIL MCLAIN ULTRA
 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: REPLACE AIR VENT

C125 1.3

DATE	12/07/12
TIME	06:21:02
FUEL	Nat Gas
COMBUSTION	
LOG	02
O2 %	5.5
CO2 %	8.8
CO ppm	21
FLUE = F	117.9
INLT = F	64.1
NETT = F	53.8
EFF (G)	92.5
LOSSES	11.3
XAIR %	35.7
CO/CO2	0.0002
CO AIR = FEE	28
PRS in H2O	0.03

Customer: _____

Appliance: _____

Ref: _____

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12 / 7 / 12

Heating and Venting System Documentation Form

Name of Owner of Inspected Unit: GENERIC RICHARDS

Address of Inspected Unit: 301 PEARL Unit # 3

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: WEIL MCLAIN ULTRA
 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: REPLACE AIR VENT

C125 1.3	
DATE	12/07/12
TIME	06:22:55
FUEL	Nat Gas
COMBUSTION	
LOG	03
O2 %	5.3
CO2 %	8.9
CO ppm	21
FLUE "H/L"	122.8
INLT "H/L"	64.1
NETT "H/L"	58.7
EFF (G)	91.4
LOSSES	11.5
XAIR %	34.0
CO/CO2	0.0002
CO AIR FREE	28
PRS inH2O	0.04

Customer

Appliance

Ref.

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 S. Burlington, VT 05403
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Date of Inspection:
12 / 7 / 12

Heating and Venting System Documentation Form

Name of Owner of Inspected Unit: GENE RICHARDS

Address of Inspected Unit: 301 PEARL Unit # 4

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: WEIL MCLAIN MSTR
 Location of Heating System: _____

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: _____

C125 1.3

DATE	12/07/12
TIME	06:24:21
FUEL	Nat Gas
COMBUSTION	
.....	
LOG	04
O2 %	6.1
CO2 %	8.4
CO ppm	25
FLUE %F	124.2
INLT %F	64.1
NETT %F	60.1
EFF (G)	90.3
LOSSES	11.6
XAIR %	41.2
CO/CO2	0.0002
CO AIR FREE	35
PRS inH2O	0.05

Customer: _____
 Appliance: _____
 Ref.: _____

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Heating and Venting System Documentation Form

Name of Owner of Inspected Unit: GENE RICHARD
Address of Inspected Unit: 361 PEARL Unit # 5

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: WEIL MCLAIN ULTRA
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: REPLACE AIR FILTER

C125 1.3	
DATE	12/07/12
TIME	06:29:12
FUEL	Nat Gas
COMBUSTION	
.....	
LOG	05
O2 %	5.5
CO2 %	8.8
CO PPM	17
FLUE °F	134.8
INLT °F	64.1
NETT °F	70.7
EFF (G)	88.2
LOSSES	11.8
XAIR %	35.7
CO/CO2	0.0001
CO AIR FREE	23
PRS inH2O	0.09
Customer
Appliance
Ref.
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Benoure Plumbing & Heating

Benoure Plumbing & Heating, Inc. TAG# 18391

34 Commerce Avenue
S. Burlington, VT 05403
Phone 802-864-7156
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Date of Inspection:

12 / 7 / 12

Heating and Venting System Documentation Form

Name of Owner of Inspected Unit: GENE RICHARDS

Address of Inspected Unit: 301 PERRILL Unit # 6

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: WEIL MCLAIN ULTRA
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: REPLACE AIR VENT

C125 1.3

DATE 12/07/12
TIME 06:33:09

FUEL Nat Gas

COMBUSTION

LOG	06
O2 %	5.3
CO2 %	8.9
CO PPM	16
FLUE %F	139.2
INLT %F	64.1
NETT %F	75.1

EFF (%)	88.2
LOSSES	11.8
XAIR %	34.0

CO/CO2	0.0001
CO AIR FREE	21

PRS inH2O 0.11

Customer

Apppliance

Ref

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Date of Inspection:
12 / 7 / 12

Heating and Venting System Documentation Form

Name of Owner of Inspected Unit: GEORGE RICHARDSON
 Address of Inspected Unit: 361 BEARL Unit # 8

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: WEIL MCLAIN ULTRA
 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: REPLACE AIR VENT
1. VENT TAG FOR
GAS HOT WATER
HEATER

<u>C125</u>	<u>- 3</u>
DATE	12/05/12
TIME	13:02:33
FUEL	Nat Gas
COMBUSTION	
LOG	02
O2 %	9.1
CO2 %	10.1
CO PPM	23
FLUE "F"	115.4
INLT "F"	58.7
NETT "F"	56.7
EFF (G)	93.9
LOSSES	11.2
XAIR %	17.4
CO/CO2	0.0002
CO AIR FREE	27
PRS inH2O	0.00
.....	Customer
.....	Appliance
.....	Ref.
.....	