

Benoure Plumbing & Heating, Inc. TAG# 20003

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

Date of Inspection:
10 / 3 / 13

Heating and Venting System Documentation Form

Name of Owner of Inspected Unit: DENISE VIGNOE

Address of Inspected Unit: 82 ADAMS 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: TRUAS INDUSTRIES
 Location of Heating System: LIVING ROOM

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
 Cert # OS-2

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: _____

SERIALIZED COMBUSTION

C125 1.3

DATE 10/03/13
 TIME 11:12:56

FUEL Nat Gas

COMBUSTION

LOG 01
 O2 % 20.7
 CO2 % -0>-
 CO PPM 00
 FLUE °F -00-
 INLT °F 68.6
 NETT °F -00-

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

CO/CO2 0.0000
 CO AIR FREE -0>-

PRS hPa 0.00

Customer

Appliance

Ref.