
Date

Tenant Name

Address

Please complete the following HEATING SYSTEM inspection sheet and return either to the inspector or the office prior to signing of the lease.

- | | | | | |
|-----|--|-----|----|-----|
| 1. | Is furnace free from fire hazards? | Yes | No | N/A |
| 2. | Does the furnace have current teflon coated, stainless steel gas flux line or properly installed black pipe? | Yes | No | N/A |
| 3. | Are furnace exhaust flue vent and collars properly connected and secured with sheet metal screws? | Yes | No | N/A |
| 4. | Are all furnace covers in place and secured? | Yes | No | N/A |
| 5. | Is the chimney and exhaust flue vent free of major soot build-up? | Yes | No | N/A |
| 6. | Does furnace have a properly working thermocouple and an automatic safety gas shut-off valve? | Yes | No | N/A |
| 7. | Has furnace been cleaned, motor oiled, and filters changed? | Yes | No | N/A |
| 8. | Is furnace blower fan motor in proper working order? | Yes | No | N/A |
| 9. | Is furnace thermostat secured and in proper working order with cover in place? | Yes | No | N/A |
| 10. | Are all portions of the heat exchanger walls free from cracks and/or repairs from welding or brazing? | Yes | No | N/A |
| 11. | Is the furnace free from rolling flames at any point on the burners? | Yes | No | N/A |

The undersigned attests either he/she or a qualified technician has checked the heating system in the above referenced unit to assure the system is installed properly and is in good working order.

Landlord/Agent

Date

Date

Tenant

Address

Please complete the following HOT WATER HEATER inspection sheet and return either to the Inspector or the office prior to signing of the lease.

- | | | | | |
|----|---|-----|----|-----|
| 1) | GAS/ELECTRIC: Does water heater have a pressure relief valve with a discharge line 6" from floor? | Yes | No | N/A |
| 2) | ELECTIC: Is water heater properly wired, electrical cable properly secured with clamp, and free of electrical hazards? | Yes | No | N/A |
| 3) | GAS/ELECTRIC: Is water heater free from water leaks? | Yes | No | |
| 4) | GAS/ELECTRIC: Are all covers and control knobs in place? | Yes | No | |
| 5) | GAS: Does water heater have a current Teflon-coated, stainless steel gas flex line, or properly installed black pipe? | Yes | No | N/A |
| 6) | GAS: Is the chimney and flue vent properly connected and secured with sheet metal screws? | Yes | No | N/A |
| 7) | GAS: Is the chimney and flue vent free of major soot build-up? | Yes | No | N/A |
| 8) | GAS: Is the thermocouple and automatic safety gas shut off valve in proper working condition? | Yes | No | N/A |
| 9) | GAS: Are venting systems designed and constructed to develop a positive flow adequate to convey all combustion product to the outside atmosphere? | Yes | No | N/A |

The undersigned attests either he/she or a qualified technician has checked the water heating system in the above referenced unit to assure the system is installed properly and is in good working order.

Landlord/Agent

Date