

RETURN FORM TO **Construction Code Services**
Truth-In-Sale of Housing/Code Compliance
 250 S. 4th Street – Room 300
 Minneapolis, MN 55415



Fax to (612) 673-5814 for TISH Call (612) 673-5840 for Code Compliance Call (612) 673-5805 TTY (612) 673-3000

HEATING, VENTILATION AND COOLING PERFORMANCE SAFETY CHECK for TISH or Code Compliance

PROPERTY ADDRESS _____ Date of Inspection _____
 *** Contractor must have the proper Minneapolis Mechanical or Gas License in order to perform the Performance Safety Check ***

Equipment Description (use a separate form for each unit):

Type _____ Location _____ Serial # _____
 Make _____ Model _____ Type of Fuel _____
 Equipment Venting Type: Atmospheric _____ Induced Fan _____ Other _____

Total Btu/hr input of all vented gas appliances per chimney: _____

Type of Chimney: Masonry _____ Class B _____ Other _____
 Type of Liner: None _____ Metal _____ Flex-liner _____ B-vent _____
 Combustion Air Supply, with air trap: Yes _____ Properly sized _____

<u>Safety & Operating Control Tests:</u>	<u>Pass</u>	<u>Flue Gas Analysis:</u>	<u>Initial</u>	<u>Final</u>
Pilot/Flame Safeguard Operating Properly	_____	Stack Temperature	_____ F/Net	_____ F/Net
Limit(s) Operating Properly	_____	Oxygen	_____ %	_____ %
Operator(s) Operating Properly	_____	Carbon Monoxide	_____ ppm	_____ ppm
Low Water Cut-Off Operating Properly	_____	Carbon Dioxide	_____ %	_____ %
All Controls Operating Properly	_____	Steady State Efficiency	_____ %	_____ %
Fuel Piping System – Okay	_____			
Burner Lights Smoothly	_____			
Connector, Vent, Chimney – Okay	_____			
Heating Unit – Okay	_____			
Combustion Chamber/Smoke Bomb Test	_____			
Vents Properly Without Spillage	_____			
Flame Stays Inside/Doesn't Roll Out	_____			

Visual Inspection (plenums, supplies, returns, etc):

Pass _____

Does the heating system operate safely and properly?

Yes _____ No _____

If the heating system does not operate safely and properly, the system needs to be repaired or replaced, with the proper permits.

Comments (List of all repairs made to the system. All necessary permits need to be obtained):

Name of Licensed Contractor: _____ Phone: _____
 Address: _____
 Name of Master: _____ Master License # : _____
 Person Performing Test: _____ Signature: _____
A licensed journeyman/master heating installer employed by this firm has inspected the heating system(s) of the dwelling listed above. The inspection revealed that the entire heating system(s) is consistent with Mn. Mechanical Code Sec. 1346.0103, 1346.0104 and Mn. Fuel Gas Code Chapter 9 for adequate heat supply, chimney vent liner, manual gas shut-Off, draft hood, venting, cleaning and servicing. As a representative of the firm, I am authorized to sign this certification on behalf of the Master heating installer.