



Heating, Venting & Cooling Inspection

INSPECTION TO BE DONE BY A MINNESOTA LICENSED HVAC CONTRACTOR

Inspection Site Address _____

Contractor Name _____

Address _____ City _____ State _____ ZIP _____

Email _____ Phone _____

Equipment Inspected

Describe the type of heating, ventilation or cooling equipment. (Use separate form for each unit.)

Make _____ Model _____ Serial # _____

Make _____ Model _____ Serial # _____

Make _____ Model _____ Serial # _____

Services Performed

Attach extra sheets as necessary.

- | | | |
|--|------|------|
| 1. Cleaned and visually inspected combustion chamber for visible cracks. | Pass | Fail |
| 2. Inspected vent connection(s) and chimney(s) for deterioration. | Pass | Fail |
| 3. Tested control system and checked its operation. | Pass | Fail |
| 4. Checked correct burner(s) input. | Pass | Fail |
| 5. Conducted visual inspection of heating unit(s) condition, including clearances to combustible materials. | Pass | Fail |
| 6. Conducted visual inspection of cooling and ventilation systems when required by housing inspector checklist. | Pass | Fail |
| 7. All wiring, including controls, are to be in safe and operational condition. | Pass | Fail |
| 8. Visual Inspection (plenums, supplies, returns, etc.) | Pass | Fail |
| 9. Does heating system operate safely and properly? <i>If the heating system does not operate safely and properly, the system needs to be repaired or replaced, with proper permits applied for and issued.</i> | Yes | No |

Describe any additional work performed.

Signature

This inspection reveals that this system is consistent with code enforcement standards applicable to this jurisdiction. This includes adequate heat supply, proper chimney, proper manual, gas shut-off, draft hood venting, cleaning and servicing. This inspection is based upon visual examination of the condition of the heating system on this date at the address listed above.

X Signature _____ Date _____