

NEW JERSEY DEPARTMENT OF COMMUNITY AFFAIRS
Division of Housing and Community Resources

Heating System & Hot Water Heater Post Installation Report

Agency: _____

Client Job #: _____

Client Name: _____

Address: _____

Telephone #: _____

Contractor: _____

<u>Check Which Applies:</u>	
_____ Oil	_____ Nat. Gas
_____ Electric	_____ L.P. Gas
_____ Kerosene	_____ Other
_____ Boiler	_____ Furnace

Other Comment: _____

Heating System	
Repair _____	Replacement _____
Post Reading	
Stack Temp.	_____
CO ₂ %	_____
Efficiency %	_____
O ₂ %	_____
CO (ppm)	_____
Draft	_____
Smoke Test (0-9)	_____

Hot Water Heater	
Repair _____	Replacement _____
Post Reading	
Stack Temp.	_____
CO ₂ %	_____
Efficiency	_____
O ₂ %	_____
CO (ppm)	_____
Draft	_____
Smoke Test (0-9)	_____

1. Emergency Switch Installed? (If not, please comment)

Heating System Yes _____ No _____

Hot Water Heater Yes _____ No _____

2. New Thermostat installed? Yes _____ No _____ (If not, please comment)

3. Unit(s) Replaced? Heating System _____ Hot Water Heater _____ (Please Comment)

4. Unit(s) Repaired? Heating System _____ Hot Water Heater _____ (Please Comment)

Agency Inspector: _____

Date _____