

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

Heating System and Hot Water Heater Post Installation Report

Agency: _____

Client Job #: _____

Client Name: _____

Address: _____

Telephone #: _____

Contractor: _____

Check Which Applies:

____ Oil	____ Nat. Gas
____ Electric	____ L.P. Gas
____ Kerosene	____ Other
____ Boiler	____ Furnace

Other Comment _____

Heating System

Repair _____ Replacement _____

Post Reading

Stack Temp. _____
CO2 % _____
Efficiency % _____
O2 % _____
Air-free CO (ppm) _____
Spillage (circle result) Fail Pass
Smoke Test (0-9) _____

Hot Water Heater

Repair _____ Replacement _____

Post Reading

Stack Temp. _____
CO2 % _____
Efficiency % _____
O2 % _____
Air-free CO (ppm) _____
Spillage (circle result) Fail Pass
Smoke Test (0-9) _____

1. Emergency Heating System 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 Signature: _____ **Date:** _____