

## Heating and Ventilation System Certificate 22-186 (E) CITY OF COLUMBIA, MISSOURI

A safety inspection by a journeyman or master mechanic licensed by the City of Columbia is required for rental units with any fuel fired appliances. All fuel fired appliances in the premises shall be inspected. No inspection is required for units that are all electric; the owner or operator should sign at the bottom for units that are all electric. **REVISED TRIAL FORM – APRIL 2017** 

Rental Property Address: Unit num						t numbers, Apt, or Rm:	
<b>Equipment Description</b>	n:				Insp	pection date:	
Туре	Location			Serial #			
Make	Model			Type of Fuel			
Total BTU input of all v	ented gas applia	ances pe	r chimr	ney:		Sized properly? □	
Type of Chimney: ☐ masonry ☐ Cla		ss B	other	□ Exposed	masonry		
Type of Liner:	□ none	☐ meta	al	☐ flex-liner	□ B-vent		
Combustion air supply:	☐ yes ☐ pro	perly size	ed Ca	lculations:			
Safety & Operating C	ontrol Tests:	F	ass			Pass	
Pilot/flame safeguard operating properly				Limit(s) operating properly			
Low water cut-off operating properly (boiled			·) 🗖	All controls operating property		rty 🗖	
Fuel piping system satisfactory (Not galvanized)				Burner lights smoothly			
Connector, vent, chimney satisfactory (Does not exceed length limit)				Visual Inspection (Plenums, supplies, returns, etc.): Pass □			
Heating unit satisfactory				Does the heating system operate safely and properly?			
Combustion chamber/smoke bomb test		test		Yes [	□ No i		
Vents properly without spillage							
Flame stays inside/doesn't roll out				If the heating system does not operate safely and properly, the			
Carbon monoxide, in house PPM				system needs to be repaired or replaced, with the proper permits			
Comments:							
HEATING AND VENTI					d ventilation eve	stems in the above premises and the	
systems are functioning	properly and saf	ely. This	certifica	ate is issued in as	sociation with o	obtaining a certificate of compliance.	
Name of licensed contr	actor						
Contractor Address					Phone #		
Mechanic Name (printed)						License #	
Mechanic's Signature _						_	
ELECTRIC HEATING This is to certify that the inspection is required.	e water heating,	space h	eating	and ventilation s	ystems at the a	above address are all electric. No electric units.	
Rental Property Owner	/Agent (Print)	 Rental	Prope	rty Owner/Agent	(Signature)	Date	