

# GAS FIREPLACE

## Maintenance / Inspection Checklist

Canadian Forces Housing Agency's Maintenance and Minor Improvements Standing Offer Document 2020-2024

Address- Street: \_\_\_\_\_ Bldg.nº: \_\_\_\_\_ Sub Bldg.nº: \_\_\_\_\_

Date Serviced: DAY/MTH/YEAR \_\_\_\_\_ Work Order nº: \_\_\_\_\_

### Appliance Information:

Year Installed: \_\_\_\_\_ Make: \_\_\_\_\_ Model nº: \_\_\_\_\_ Serial nº: \_\_\_\_\_

BTU input rating: \_\_\_\_\_ Venting type: (power, direct or conventional) \_\_\_\_\_

Blower Fan Installed: (yes or no) \_\_\_\_\_

### Items to be serviced or inspected:

Check and Populate applicable box(es) N/A = Not Applicable; C = Completed; A/R = Action Required

		N/A	C	A/R	Describe Action Required:
1.	Blower motor wheel and fan – inspected and cleaned				
2.	Pilot and burners – inspected and cleaned				
3.	Gas pilot safety system – inspected				
4.	Venting and chimney draw – inspected				
5.	Combustion and air ventilation – inspected				
6.	Dampers and vents – inspected, cleaned and adjusted				
7.	CO Combustion efficiency test – performed and results attached				
8.	Glass – inspected and cleaned				
9.	Gasket – inspected				
10.	Fire box – inspected				
11.	Fire logs – inspected and cleaned				
12.	Gas pipe and valve – inspected				
13.	Thermostat/sensor and other controls – inspected				
14.	Exterior of unit – inspected				
15.	Electrical wiring and connections – inspected, cleaned and tightened				
16.	Clearances to combustible materials – inspected				
17.	Appliance operation after servicing – tested				

### Occupant's information: (write "VOID" if RHU is vacant) Contractor's information:

Occupant's name: \_\_\_\_\_ Technician's name: \_\_\_\_\_

Occupant's signature: \_\_\_\_\_ Certificate nº: \_\_\_\_\_

