



CHARTER TOWNSHIP OF REDFORD

EQUIPMENT CERTIFICATION FORM

12200 BEECH DALY ROAD, REDFORD MICHIGAN 48239
313-387-2680 – FAX 313-387-2610

FURNACE / BOILER / MECHANICAL EQUIPMENT CERTIFICATION

MUST BE CURRENTLY LICENSED BY STATE OF MICHIGAN

CONTRACTOR INFORMATION

MECHANICAL CONTRACTOR _____
ADDRESS _____ CITY _____
LICENSEE NAME _____ LICENSE # _____
CIRCLE CATEGORY: 1 2 3 4 5 6 7 8 9 10 A B C D E F
PHONE # _____

OWNER INFORMATION AND LOCATION

JOB ADDRESS _____
OWNER NAME _____ PHONE _____

FURNACE / BOILER EQUIPMENT

MAKE / BRAND _____ MODEL _____ SERIAL _____
C/O TEST RESULTS: FLUE _____ ppm AIR STREAM _____ ppm
HEAT EXCHANGER CONDITION _____ FILTER _____

CONTRACTOR CERTIFICATION

ADDITIONAL COMMENTS _____

***I CERTIFY I HAVE INSPECTED THE EXISTING CHIMNEY LINER
AND IT IS IN GOOD SAFE CONDITION***

CONTRACTOR NAME: _____ (PLEASE PRINT)

CONTRACTOR SIGNATURE _____ DATE _____

***I CERTIFY THE FURNACE/BOILER & CONTROLS LISTED ABOVE ARE IN GOOD SAFE
OPERATING CONDITION.***

I HAVE CLEANED AND CHECKED THIS FURNACE/BOILER.

CONTRACTOR NAME: _____ (PLEASE PRINT)

CONTRACTOR SIGNATURE _____ DATE _____