



Gas or Oil Fuelled Appliance Inspection Form

[Form E]

***Form must be completed by a Class 1 or Class 2 Gas Fitter or Oil Burner Technician**

Rental Address: _____

City: _____ Postal Code: _____ Unit#: _____

*A separate form must be completed for each unit at the property.

Heating Contractor Information

Heating Contractor's Name: _____

Phone Number: _____

TSSA Registration Number: _____

Gas Fitter or Oil Burner Technician's Name: _____

Inspector's Declaration

I, a licensed Class 1 or 2 Gas Fitter or Oil Burner Technician, certify that this unit has been inspected and that ALL GAS AND/OR OIL FUELLED HEATING APPLIANCES (including, but not limited to: furnace, water heater, gas fireplace, gas stove) have passed this inspection.

Signature: _____

Date: _____