New Westminster

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Heating System Installation Certification

PLEASE SUBMIT TO BUILDING DEPARTMENT PRIOR TO FRAME INSPECTION

To: The Building Inspector
City of New Westminster

Building Permit No. _____

Re: Address of project _____

This is to certify that the **installation** of the: (*Check applicable system*)

FORCED AIR HEATING SYSTEM
ELECTRICAL HEATING SYSTEM

for the dwelling(s) located at the above noted property has been installed to conform with good engineering practice as required by the current edition of the BC Building Code and in accordance with the certified design.

Manuals for all equipment, electrical wiring diagram and a copy of the maintenance requirements for all heating system components which require periodic maintenance have been left on site for the information of the owner.

Certified this _____ **day of** _____, 20_____.

HEATING CONTRACTOR

Business License No._____

Company _____

Address _____

Principle (print) _____

Phone # _____

Signature _____

OWNER/BUILDER

Business License No. _____

Company _____

Address_____

Owner (print)_____

Phone # _____

Signature _____