

# Water Heater Installation Certificate

Property Address: \_\_\_\_\_

Property Owners Name and contact phone number: \_\_\_\_\_

Make/Model of appliance: \_\_\_\_\_ BTU's: \_\_\_\_\_

(Circle one):     Direct Vent;     Fan Assisted;     Atmospherically Vented;     Electric;

Water heater location: \_\_\_\_\_  
(example: basement mechanical room, main floor closet, attic, garage, crawlspace, etc.)

This letter of certification shall serve as evidence that the water heater installation is complete, installed to the adopted Mechanical, Plumbing and Fuel Gas Codes applicable in the State of Minnesota and City of Owatonna and applicable manufacturer's installation instructions. The following items have been verified correctly installed:

Manufactured homes and apartment units will require inspection. Contact 444-4370 to schedule.

Check "X" on line if applicable.

- I. \_\_\_\_\_ Venting is installed through use of an existing chimney with approved liner or direct vented out the side wall and not within minimum vertical and horizontal clearances to openings back into the building. Venting meets the manufacturer's installation instructions. Venting and combustion air are a minimum of 12" above grade.
- II. \_\_\_\_\_ Combustion air is provided and sized according to code and Manufacturer's requirements.
- III. \_\_\_\_\_ Hot water lines are insulated to mitigate heat loss.
- IV. \_\_\_\_\_ Shut off valve is installed on the inlet side of the water service.
- V. \_\_\_\_\_ Temperature relief valve is installed, and relief piping is extended within 18" of the floor and/or collection receptacle.
- VI. \_\_\_\_\_ CSST gas piping is bonded and all gas piping and connections have been air tested or soap tested.
- VII. \_\_\_\_\_ Potable water disinfection is complete and the certification form is completed and submitted with this form to the Building Inspection Division.
- VIII. \_\_\_\_\_ Manufacturer's installation instructions left at site for owner.

I certify the installation meets Minnesota State codes and manufacturer's installation requirements.

\_\_\_\_\_ (signature) \_\_\_\_\_ (date)

Company address and contact information:

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