

*City Of Melvindale*  
*Department of Building and Safety*  
*3100 Oakwood, Melvindale, Michigan 48122*  
*(313) 429-1060*

**Furnace/ Boiler/ Mechanical Equipment Certification**

Must be currently licensed by the State of Michigan  
and register with the **CITY OF MELVINDALE**

**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 # \_\_\_\_\_ Registered with city - Yes/ No

**Property - Owner Information and Location**

Job Address \_\_\_\_\_  
Owner Name \_\_\_\_\_ Phone # \_\_\_\_\_

**Furnace/ Boiler Equipment Condition**

Make/ Brand \_\_\_\_\_ Model \_\_\_\_\_  
Serial \_\_\_\_\_  
C/O Test Results: Flue \_\_\_\_\_ ppm      Air Stream \_\_\_\_\_ ppm  
Heat Exchanger Condition \_\_\_\_\_

**Contractor Certification**

Additional Comments \_\_\_\_\_  
\_\_\_\_\_

**I certify I have inspected the existing chimney liner and it is in 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 \_\_\_\_\_