**Inspection request form for fuel burning appliance**

**As per the Standard Council of Canada accreditation program for Inspection Body**

|  |  |
| --- | --- |
| **Submitor/Applicant** | |
| Company: | Contact: |
| Address: | City: |
| Province: | P.C.: |
| Email: | Tel. / Cell. : |
| **Technical expert (if different from submitor)** | |
| Company: | Contact: |
| Email: | Tel. / Cell. : |
| **Billing address (if different) / No third-party billing allowed** | |
| Company: | Contact: |
| Address: | City: |
| Province: | P.C.: |
| Email: | Tel. / Cell. : |
| **Place of inspection** | |
| Company: | Contact: |
| Address: | City: |
| Province: | P.C.: |
| Email: | Tel. / Cell. : |

|  |  |  |
| --- | --- | --- |
| **Information on Appliance installation** | | |
| Manufacturer: | Model: | Serial: |
| Combustible(s): | Supplied pressure (psi): | Appliance regulator, downstream pressure (psi) : |
| Pilot regulator, downstream pressure (psi): | Pilot Capacity MAX.(Btu/h): | Main burner capacity MAX.(Btu/h): |
| Voltage (power) :\_\_\_\_\_\_\_\_\_ Vac/dc :\_\_\_\_\_\_\_\_\_ Hertz :\_\_\_\_\_\_\_\_\_ Amp.:\_\_\_\_\_\_\_\_\_  Voltage (control) :\_\_\_\_\_\_\_\_\_ Vac/dc :\_\_\_\_\_\_\_\_\_ Hertz :\_\_\_\_\_\_\_\_\_ Amp. :\_\_\_\_\_\_\_\_\_ | | |
| Is an Electrical Inspection required at same time (SPE-1000)? : | | |
| Appliance will be operated over 24h non-stop? : | | |
| Installation is done in a classified area (HAZLOC)? : | | |
| PLC used in the burner management system (BMS)? : | | |
| Indoor / outdoor installation? : | | |
| Preferred inspection date? : | | |
| **Function / Appliance description:** | | |
|  | | |
|  | | |
|  | | |
|  | | |
|  | | |
|  | | |
|  | | |
|  | | |

|  |  |
| --- | --- |
| **Provide a copy of**: | |
| Rating plate information (gas + electric): |  |
| Gas train schematic or P&ID: |  |
| Electrical Schematic (‘’ladder’’ type): |  |
| Bill of material with cross references to the schematics (manufacturer, model, certifications, characteristics et adjustments) : |  |
| Purge calculation, complete details.  Including:   * all dimensions; * flue gas volumes (ex: stack, heat exchanger, piping, etc.). |  |
| Operation manual, maintenance manual, etc.: |  |
| Picture or any additional supporting documentation: |  |
| Start up report including limiter settings and combustion readings (if already available): |  |

**Application by an authorized representative of the applicant:**

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please send the fully completed and signed form with the relevant documents to:**

[info@CGApprobation.com](mailto:info@CGApprobation.com)