Please specify inspections performed and any corrective actions or adjustments made.

☐ 1. Inspect Filters: __________________________________________________________________________

☐ 2. Inspect duct work: _________________________________________________________________________

☐ 3. Inspect flue and vent system: ______________________________________________________________

☐ 4. Inspect combustion air opening for blocks or restrictions: _________________________________________

☐ 5. Inspect thermostat operation:  _______________________________________________________________

☐ 6. Inspect blower assembly including housing, wheel, and motor: _________________________________

☐ 7. Inspect electrical outlet for proper voltage: _____________________________________________________

☐ 8. Inspect and tighten electrical connections: _____________________________________________________

☐ 9. Perform heat rise test: ______________________________________________________________________

☐ 10. Inspect safety controls and heat exchanger: _____________________________________________________

☐ 11. Inspect burner assembly:  ___________________________________________________________________

☐ 12. Inspect and clean flame sensor:  _____________________________________________________________

☐ 13. Inspect inducer:  _________________________________________________________________________

☐ 14. Inspect ignition system: _____________________________________________________________________

☐ 15. Inspect for gas leaks in furnace:  _____________________________________________________________

☐ 16. Inspect for carbon monoxide:  ______________________________________________________________________

Approximate age of furnace: _____________________________________________________________________

I hereby certify that the inspection and corrective measures or adjustments noted were performed.

Customer Signature: __________________________ Date: ______________

Customer Name (Please Print): __________________________ Account Number: ______________

I hereby certify that the inspection and corrective measures or adjustments noted were performed.

Contractor Signature: __________________________ Date: ______________

Contractor Name (Please Print): __________________________ License Number: ______________

Zia Natural Gas Company wants to encourage you to have your furnace inspected or “tuned up.” This gives a professional an opportunity to check 16 specific points for possible issues and correct them to have your furnace running in top shape, helping to conserve energy. To receive your $25 rebate: Simply have a licensed contractor complete and sign this form, then submit it along with a copy of contractor invoice and completed Rebate Application.