GREEN RESIDENTIAL BUILDING PROGRAM
2013 Combustion Safety Testing Form

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Home or Unit Address _____

☐ ***PLEASE CHECK HERE IF NO COMBUSTION APPLIANCES ARE PRESENT IN THE HOME***

Combustion Appliance Zone (CAZ) # _____ **of** _____ **Location of this CAZ:** _____

(Use additional forms if more than one CAZ or if home has multiple heating systems or water heaters)

Date of Test: _____ **Outdoors Temp During Test:** _____ ^{0}**F**

CAZ Depressurization (***NOTE***: Net Change = Test Pressure – Base Pressure)

Base Pressure: _____ **pa.** **CAZ Ambient CO:** _____ **PPM**

Test Pressure: _____ **pa.** **Appliances/Fireplace Simulated for Test?** **Yes / No**

Net Change: _____ **pa.** **If Yes, Total CFM Simulated** _____ *(explain in notes)*

NOTES: _____

Heating System	**Primary:** Yes / No			**Type:** Furnace / Boiler / Heat Pump / Other_____				
Efficiency [1]	***Fuel Type*** [2]		***Venting Type*** [3] *(Circle Type)*	***Draft*** *(Pascal)*	***Spillage*** *(Worst Case)*	***Spillage*** *(Natural)*	***CO*** *(Worst Case)*	***CO*** *(Natural)*
Rating:	N P O E		N V M S	Pa.	Pass / Fail	Pass / Fail	PPM	PPM
Water Heater	**Primary:** Yes / No		**Type:** Standard Tank / Indirect / Tankless or Instantaneous Commercial (*See Note 5 below*)			**Size:** ____ *(Gallons)*	**Style** [4] Common Vent ☐ Stand Alone ☐	
Efficiency [5]	***Fuel Type*** [2]		***Venting Type*** [3] *(Circle Type)*	***Draft*** *(Pascal)*	***Spillage*** *(Worse Case)*	***Spillage*** *(Natural)*	***CO*** *(Worse Case)*	***CO*** *(Natural)*
EF:	N P O E		N M S	Pa.	Pass / Fail	Pass / Fail	PPM	PPM
Oven	**Oven is Electric or No Oven Exists** ☐				**Oven Range Hood Vented to Outside** Yes / No			
	Oven CO _____PPM				**Ambient CO** (During Oven CO Testing) _____ PPM			

[1] ***Heating System Efficiency:***	Enter AFUE for furnace or boiler; HSPF for heat pump; COP if heat pump is geothermal
[2] ***Fuel Type:***	**N** = Natural Gas **P** = Propane **O** = Oil **E** = Electric
[3] ***Venting Type:***	**N** = Natural/Atmospheric **V** = Natural/Atmospheric PLUS Vent Damper **M** = Mechanically Assisted **S** = Sealed (Two Pipe) ***NOTE:*** If the **Venting Type** selected is **M**, no **Draft** test is required for that appliance. If the **Venting Type** selected is **S**, no **Draft** or **Spillage** tests are required for that appliance. A **CO** test **IS REQUIRED** for **all** appliances regardless of Venting Type, if the exhaust vent is accessible.
[4] ***Water Heater Style:***	Commonly Vented with Heating System or Stand Alone (Independently Vented or Orphaned)
[5] ***Water Heater Efficiency:***	If Water Heater Type is ***Indirect***, no EF entry is required. If Water Heater Type is ***Tankless***, enter efficiency of combustion source. ***NOTE:*** If Water Heater Type is "**Commercial**" and the unit is **99 gallons or less**, enter a maximum-modeled EF of **.54** If Water Heater Type is "**Commercial**" and the unit is **100 gallons or more**, enter a maximum-modeled EF of **.48**

Rater Name: _____ **Rater Number:** _____

Rater Signature: _____ **Date:** _____

This Combustion Safety Testing Form, Green Residential Building Program Qualification Form, Incentive Application, and required documentation must be submitted before incentives will be processed.

Submit completed forms by e-mail to:

New York State Energy Research and Development Authority (NYSERDA)
grbp@nyserda.ny.gov

Incomplete forms will be returned to the Applicant and will delay processing. Facsimile Transmissions will not be accepted.