

COMBUSTION AIR/MAKE-UP AIR WORKSHEET

Date: _____

Name: _____ Site Address: _____

Total floor Area (including basement): _____

Size of Room with Combustion Equipment: _____

Average Ceiling Height _____ Number of Bedrooms _____

***Check all that apply**

Year Home was Constructed		
Pre-1994	1994-2003	2004 and After
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Combustion Equipment (Existing & New)			
	Atmospheric Vent	Fan Assist/ Power Vent	Direct Vent	Electric
Water Heater Input: _____ BTU	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Furnace/Boiler Input: _____ BTU	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Furnace/Boiler Input: _____ BTU	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fireplace			
Gas D.V.	Gas Log Insert	Wood Burning/Solid Fuel	Factory Wood Burning/ Solid Fuel Closed Combustion with Combustion Air
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Ventilation System/Per Energy Code, Not Mechanical Code	
Exhaust Only	Balanced
<input type="checkbox"/>	<input type="checkbox"/>
Fan 1 CFM: _____	
Fan 2 CFM: _____	

Exhaust Systems		
	Yes	N/A
Kitchen	<input type="checkbox"/> CFM: _____	<input type="checkbox"/>
Central Vacuum	<input type="checkbox"/> CFM: _____	<input type="checkbox"/>
Other _____	<input type="checkbox"/> CFM: _____	<input type="checkbox"/>