Field Verification Template FS Advisory FS-263-23



Date of Verification Site address Name, title, certificate type, certificate # of the person doing the field verification Name, title, certificate type, certificate # of the technician's work being evaluated Description of work Date when work was completed			
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•			
Date when work was completed			
•			
Fuel type			
Type/manufacturer/model#/serial# of the equipment that was serviced/installed as applicable	6		
	Yes	No	N/A
Equipment was installed and tested to code and manufacturer's instructions as applicable			
All test results were documented			
Equipment was approved for its intended use			
Appliance manual left on site			
Instructed users on safe operation			
Requirement to tag equipment upon installation completion			
Venting is compliant with code and manufacturer's instructions			
Electrical is compliant within the TSSA's certificate scope			
Service and access clearance are compliant with code			
Combustion air is sufficient			
Clearance to combustibles is compliant with code and manufacturer's instructions	;		
Any non-compliances discovered were actioned as appropriate as outlined in the regulations regarding unacceptable condition			
Any incidents as defined in TSSA's guidelines were reported			
If the premises were supplied fuel for the first time, user was instructed not to use equipment until the fuel distributor has completed their initial inspection			
Notes			