

**CD/80 solid fuel installation completion report**

COMPLETE ALL THE UNSHADED AREAS APPLICABLE TO THE CONTRACT OF WORK UNDERTAKEN

Customer name	Company name & address
Installation address	
Installation date	Company tel. no.
	Company OFTEC reg. no.

Technician name	Technician OFTEC reg. no.
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1 Appliance details

Appliance type:	<input type="checkbox"/> Dry open fire	Appliance make	<input type="text"/>
	<input type="checkbox"/> Open fire with boiler	Appliance model	<input type="text"/>
	<input type="checkbox"/> Dry cooker	Appliance location	<input type="text"/>
	<input type="checkbox"/> Cooker with boiler	Appliance heat output to room	<input type="text"/> kW
	<input type="checkbox"/> Dry roomheater	Appliance heat output to boiler	<input type="text"/> kW
	<input type="checkbox"/> Roomheater with boiler	New hearth and surround fitted	<input type="checkbox"/>
	<input type="checkbox"/> Boiler	Existing hearth and surround repaired/modified	<input type="checkbox"/>
CE marked carbon monoxide detector fitted?	<input type="checkbox"/>		

2 Flueing arrangements

Reuse existing masonry chimney	<input type="checkbox"/>	Data plate location	<input type="text"/>
Install non-masonry flue/chimney system	<input type="checkbox"/>	Number of bends	<input type="text"/>
Install a flue liner	<input type="checkbox"/>	Diameter of flue	<input type="text"/> mm
Provision for cleaning	<input type="checkbox"/>	Flue draught stabiliser fitted	<input type="checkbox"/>

3 Air supply detailsCombustion cm²**4 Control(s) details**

Controls fitted:	<input type="checkbox"/> Programmer	Independent time & temperature control to CH	<input type="checkbox"/>
	<input type="checkbox"/> Room thermostat (programmable)	Independent time & temperature control to DHW	<input type="checkbox"/>
	<input type="checkbox"/> Cylinder thermostat	No. of zones: Heating	<input type="text"/>
	<input type="checkbox"/> Tempering valve on DHW	DHW	<input type="text"/>

5 Wet system details

Reuse existing system without modification	<input type="checkbox"/>	Preparation - system cleansed & flushed?	<input type="checkbox"/>
Extend/modify an existing heating system	<input type="checkbox"/>	Completion - system flushed & inhibitor added?	<input type="checkbox"/>
Install a new heating system	<input type="checkbox"/>		

6 Commissioning

All equipment within scope of the contract of work has been commissioned as per the manufacturer's instructions?	<input type="checkbox"/>
An OFTEC CD/81 form (or equivalent) has been provided as evidence of commissioning taking place?	<input type="checkbox"/>

7 Declaration of Completion

I confirm that the work described above has been installed in compliance with the equipment manufacturers' instructions and appropriate building regulations. The equipment has been commissioned (where required), the owner has been provided with installation/operating manuals and has been provided with a demonstration of the installation's operating requirements.

Print name	<input type="text"/>	Signed	<input type="text"/>	Date	<input type="text"/>
Accepted by	<input type="text"/>	Signed	<input type="text"/>	Date	<input type="text"/>

SOLID FUEL COMMISSIONING & SERVICING SCHEDULE

1 Fuel Storage			
1.1	Check fuel type is suitable for the installation.		
1.2	Check fuel storage conditions are suitable.		
1.3	Check general condition of the fuel.		
1.4	Check fuel storage is not too close to the appliance.		
2 Air supply			
2.1	Check free area of combustion air supply and suitability of source.		
2.2	Check vent type is suitable and not blocked.		
2.3	Check make up air supply for extract fan, if fitted in the same room as the appliance, and prove.		
3 Chimney/flue			
3.1	Check for flue and hearth data plate.	3.7	Check condition of register/closure plate, if accessible.
3.2	Check flue diameter.	3.8	Visually inspect the flue/chimney.
3.3	Check stabiliser/damper operation, if fitted.	3.9	Carry out coring ball test.
3.4	Check for correct termination and position.	3.10	Carry out applicable smoke test(s).
3.5	Check clearance to combustible materials.	3.11	Check for satisfactory flue draught reading.
3.6	Check rope seals for condition and replace if necessary.	3.12	Advise customer if sweeping is necessary.
4 Electrical safety (if applicable)			
4.1	Visually inspect electrical connections, earth bonding and check fuse rating.		
5 Hearth			
5.1	Check hearth material.	5.4	Check hearth location in relation to combustible materials.
5.2	Check hearth thickness.	5.5	Check superimposed hearth, if applicable.
5.3	Check hearth dimensions.	5.6	Check hearth for general condition.
6 Open fire			
6.1	Check condition of rope seal between fire back and surround.		
6.2	Check condition of fire back.		
6.3	Check throat opening is 110mm ± 10mm.		
6.4	Check condition of the gather.		
7 Boiler/cooker/roomheater			
7.1	Clean fans and check for wear.		
7.2	Remove and clean all firebox components.		
7.3	Clean internal flueways.		
7.4	Remove ashpit cover and check for airtight fit.		
7.5	Clean ashpit.		
7.6	Check condition of seals to ensure no ingress of air other than through correct air supply.		
7.7	Check fire door alignment and adjust if necessary.		
7.8	Check condition and operation of control devices.		
8 Carbon monoxide detector			
8.1	Check carbon monoxide detector is appropriately located.		
8.2	Check carbon monoxide detector is CE marked.		
8.3	Activate alarm via test button.		
9 Wet system components			
9.1	Check operation of time and temperature controls.		
9.2	Check operation of motorised zone valve(s).		
9.3	Check operation of circulating pump.		
9.4	Check hot water cylinder compatibility with circulation design.		
9.5	Check arrangement of feed and expansion components and their suitability.		

A copy should be retained by yourself and the customer.



CD/81 solid fuel commissioning & servicing report

COMPLETE ALL THE UNSHADED AREAS APPLICABLE TO THE CONTRACT OF WORK UNDERTAKEN

Customer name	Company name & address
Customer (site) address	
Date of work carried out	
	Company tel. no.
	Company OFTEC reg. no.

Technician name	Technician OFTEC reg. no.
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Appliance type	Dry open fire <input type="checkbox"/>	Open fire with boiler <input type="checkbox"/>	Dry cooker <input type="checkbox"/>	Cooker with boiler <input type="checkbox"/>
	Dry roomheater <input type="checkbox"/>	Roomheater with boiler <input type="checkbox"/>	Boiler <input type="checkbox"/>	

Appliance make (if applicable)	Model (if applicable)
Appliance location	Fuel type(s)

Call type	Commission <input type="checkbox"/>	Service <input type="checkbox"/>	Other <input type="checkbox"/>
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Commissioning & servicing schedule (Confirm in accordance with checklists on the reverse and tick as appropriate)

No.	Schedule item	Checked?	Passed?	Parts fitted/observations
1	Fuel storage			
2	Air supply			
3	Chimney/flue testing			
	- Visual			
	- Coring ball			
	- Smoke leakage			
	- Smoke draw			
	- Draught			<i>mbar / Pa / inWG / mmWG</i>
4	Electrical safety			
5	Hearth			
6	Open fire			
7	Boiler/cooker/roomheater			
8	Carbon monoxide detector			
9	Wet system components			

Important comments (The comments may include advice on remedial work necessary to enable the installation to comply with the requirements of regional building regulations and manufacturers' instructions)

Report accepted by	Signed	Date
Technician name	Signed	Date