



MILTON KEYNES BUILDING CONTROL



Combustion Installation

1. Building address, where work has been carried out:	
2. Identification of hearth, fireplace, chimney or flue.	
3. Firing capacity:	
4. Intended type of appliance. State type or make. If open fire give finished Fireplace opening dimensions.	
5. Ventilation provisions for the appliance: State type and area of permanently open air vents.	
6. Chimney or flue construction a) State the type or make and whether new or existing b) Internal flue size (and equivalent height, where calculated – natural draught gas appliances only). c) If clay or concrete flue liners used confirm they are correctly jointed with socket end uppermost and state jointing materials used. d) If an existing chimney has been refurbished with a new liner, type or make of liner fitted. e) Details of flue outlet terminal and diagram reference. Outlet Detail: Complies with: f) Number and angle of bends. g) Provision for cleaning and recommended frequency	
7. Hearth. Form of construction. New or existing?	
8. Inspection and testing after completion Test carried out by: Tests (Appx E in AD J 2002 ed) and results Flue visual Inspection sweeping coring ball smoke Appliance (where include) spillage	

the undersigned certify that the above details are correct. In my opinion, these works comply with the relevant requirements in Part J of Schedule 1 to the Building Regulations.

Name and title:

Profession:

Capacity:

Tel no:

Address:

Postcode:

Signed

Date:

Registered membership of...(e.g. CORGI, OFTEC, HETAS, NACE, NACS)

**A separate Certificate should be provided for each installation.
See overleaf for an example Certificate.**

