

Vermont Housing and Conservation Board Lead Based Paint Hazard Reduction Program

Forced Air Heating System Information Sheet

Date: _____ VHCB Building # _____

Address: _____ Unit(s) # _____

For buildings with forced air heating systems, please provide the following information:

Number of units in this building: _____ Number of forced air heating systems _____

Unit(s) are: Occupied Unoccupied

Building is: one story two story three story Vents on levels? B 1 2 3

Building Has: Full Basement Partial Basement Crawl Space

Furnace type if known: _____ Fuel: Oil Gas Propane

BTU's if known: _____ Ductwork is: Metal Fiberglass Other: _____

Furnace location: Basement Other: (list room #) _____

In basement locations, is the ductwork exposed and accessible? YES NO

Is there an exterior access or door to the basement? YES NO

Number of Vents Counted: _____ Are Vents Painted? YES NO

If Painted, Number of Vents that tested Positive for Lead Paint: _____

Was a vent dust sample collected? YES NO

Is the Ductwork visibly deteriorated or are there broken, missing or dismantled sections in any locations? YES NO

Is suspect asbestos TSI present in the basement? YES NO

If present, what is the condition of the material? _____

Is additional asbestos investigation needed? YES NO