	Weatherization Ass	stance Program Heating System Standard Quote Form		
(۱	Client Name:	Company Name:	Company Name:	
	Address:	Address:	Address:	
	Phone:	Phone:		
	Date of Visit to Client Home:	Contact Person:	Contact Person:	
3)	Quote Price: Heating System C) System to be Installed:			
	Total Materials: \$	Brand:		
	Total Labor: \$ Total: \$	OEM Model #: Burner OEM Model # and Warranty:		
	Quote Price: Chimney Work (if app)	Length of Manufacturer's Warranty:		
	Total Materials: \$	Length of Warranty (Parts & Labor):		
	Total Labor: \$	Please Provide Proof of Energy Star		
	Total: \$	<u> </u>		

Note: Contractor is responsible for all dismantling, removing, and legally disposing of old heating system and any ancillary components.

E) Installation Includes the Following (check appropriate box):

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1) DHW mixing valve	16) New smoke pipe & draft regulator			
New boiler provides hot water	17) New service switch in EMT from ceiling			
3)Automatic water feeder	18) Connect oil lines to burner w/new brass flared fittings			
4) Air scoop & flow check	19) Check for firematic oil safety valve at oil tank filter			
5) New expansion tank brand: Size:	20) Chimney work (Liner/Repair) Y or N			
6) Zone service valves	21) Place heating system on blocks			
7) Balancing valves	Check Box to Confirm the Following Will be Done:			
8) Circulator pump type: Qty: Size:	22) Obtain all necessary permits			
9) Zone valve Qty:	23) Start-up, set-up (burner tune) & systems checks			
10) Heating zone(s): T-stat Brand:	24) Burner Combustion Efficiency Report			
11) Heating supply-return pipe new from ceiling to boiler	25) Depressurization test per OEM			
12) Relief valve - drain within 6" of floor	26) Test all emergency controls & shut-off switches 27) Educate client on thermostat usage 28) Educate client on heating system usage			
13) Net BTU Output:				
14) New oil filter at burner with Firematic safety valve				
15) New firematic heat sensor above boiler/furnace	Other Pertinent Info:			

All material is guaranteed to be as specified and must be installed and tested per manufacturers requirements and all local, State and Federal codes. All work is to be completed in a professional manner according to standard practices. Once quote has been accepted there will be no alteration or deviation from above specifications. Contractor will not be paid for any extras or upgrades, unless prior written approval has been authorized by the contracting agency and the Department of Social Services Weatherization Assistance Program Manager. Quote will be valid for 60 days from email/postage date.

F)	Signature:	CT State License #:	
	Name:	Title:	Type:
	Date:		Expiration Date:

By signing this document, you certify that this form has been completed by you or by a designee from your company. No DEEP, DSS or Community Action Agency staff were involved in completing this form in any fashion.