

CHIMNEY INSPECTION REPORT

Company Name:	
Inspector Name:	
Company Phone:	
Company Email:	
Client Name:	
Inspection Date:	
Inspection Address:	
Client Phone:	
Client Email:	

Type of Inspection

☐ Level 1 – Visual inspection of readily accessible components

☐ Level 2 – Level 1 plus accessible areas via panels, crawlspaces, attics, or video scan

☐ Level 3 – Includes removal of components for access (not included in this standard report)

Structure Details

Chimney Location on Structure:

☐ Interior ☐ Exterior

Chimney Type:

☐ Masonry ☐ Prefabricated/Factory Built

☐ Other: _____

Flue Material:

☐ Clay Tile ☐ Stainless Steel

☐ Aluminum ☐ Other: _____

Number of Flues: _____

Appliances Connected to Flue(s):

☐ Fireplace ☐ Wood Stove

☐ Gas Insert ☐ Furnace

☐ Boiler ☐ Other: _____

Exterior Chimney Inspection

Component	Condition	Comments
Chimney Structure	☐ Good ☐ Fair ☐ Poor	
Chimney Crown / Chase Cover	☐ Good ☐ Fair ☐ Poor	
Flashing	☐ Good ☐ Fair ☐ Poor	
Brickwork / Mortar	☐ Good ☐ Fair ☐ Poor	
Chimney Cap Present	☐ Yes ☐ No	
Spark Arrestor Present	☐ Yes ☐ No	
Visible Leaning or Settlement	☐ Yes ☐ No	

Interior Flue Inspection

Component	Condition	Comments
Flue Liner (Tiles or Metal)	☐ Good ☐ Fair ☐ Poor	
Flue Joints and Gaps	☐ Intact ☐ Cracked	
Creosote or Soot Accumulation	☐ Light ☐ Moderate ☐ Heavy	
Smoke Chamber Condition	☐ Good ☐ Fair ☐ Poor	
Blockages or Obstructions	☐ Yes ☐ No	
Thimble / Connector Condition	☐ Secure ☐ Loose ☐ Damaged	

Fireplace, Stove, or Appliance Area

Component	Condition	Comments
Firebox or Stove Interior	☐ Good ☐ Fair ☐ Poor	
Damper Operation	☐ Operational ☐ Defective	
Hearth Protection	☐ Adequate ☐ Inadequate	
Clearances to Combustibles	☐ Compliant ☐ Noncompliant	
Connector Pipe / Vent Condition	☐ Secure ☐ Corroded ☐ Loose	

Observed Safety Concerns

☐ No Immediate Hazards Identified

☐ Creosote Buildup

☐ Structural Damage (Cracks, Shifting)

☐ Flue Obstruction or Blockage

☐ Inadequate Clearance to Combustibles

☐ Missing Components (Cap, Damper, etc.)

☐ Other: _____

Photo Documentation

☐ Photos Attached

☐ No Photos Taken

Recommended Actions

Issue Identified	Recommendation	Urgency
		☐ Low ☐ Medium ☐ High
		☐ Low ☐ Medium ☐ High
		☐ Low ☐ Medium ☐ High

Inspector Summary

General Condition of Chimney System:

☐ Good ☐ Fair ☐ Poor

System Safe for Continued Use:

☐ Yes ☐ No ☐ Not Until Repairs Are Completed

Additional Notes:

Inspector Acknowledgment

Inspector Name (Printed):

Signature:

Date:
