

2020-64 Labor Claim Form - July 10, 2020

Claim #			
Authorized	Yes $\square$	No 🗖	

## Labor Claim Form — Prestige Solo & Excellence - Prefix PT – PA – PEA - PB & PEB Product Recall

Please print clearly and complete all fields to ensure your claim is processed. This form is unique and only one claim may be submitted for each form. The same boiler cannot be claimed more than once. It is my responsibility to arrange access to carry out the work, no labor claim will be paid without completing the task in accordance with Field Repair Instructions.

Contractor Information	Site Information			
Legal Company Name:	Property Owner/Occupier Name:			
Company Address:				
City Zip Code  E-mail  Phone	City — Province — Zip Code — — — — — — — — — — — — — — — — — — —			
Boiler & Installation Information				
Boiler model: Boiler Serial Number:	Gas Type: NG □ LP □			
PARKIT 160 - Appliance adapter mechanical fixing kit Installation date:				
CO Detector fitted i.a.w. Manufacturer's Instructions: Yes $\Box$ No $\Box$	Correct Rating Label for Gas Type is attached to boiler: Yes $lacksquare$ No $lacksquare$			
COMBUSTION READINGS RECORDED DURING REPAIR  Analyser is set to correct gas type: NG LP Combustion Readings - Complete Check  Turn the Boiler off if the combustion readings required by Triangle Tube cannot be achieved!  CO Analyser model type used:  Operating at High Fire Readings as found Readings as left	The combustion readings were taken i.a.w. instructions provided by Triangle Tube Yes No Vent & Air Supply is in accordance with Triangle Tube Installation Instructions Yes No Submitting this form, I confirm that PARKIT 160 has been correctly fitted and that combustion measurements are in accordance with Triangle Tube required range detailed on the kit installation instruction  I confirm that no members present during the repair were shielding, self-isolating or displaying symptoms of COVID 19 and that at all times we maintained the required social distancing 6 ft apart.			
CO <sub>2</sub> [%] O <sub>2</sub> [%]	Installer's Name (in prints)  Property Owner's Name (in prints)			
CO [ppm] OPERATING AT LOW FIRE	Date & Signature Date & Signature			
CO <sub>2</sub> [%]				
O <sub>2</sub> [%]	Property Owner/End User declined to sign Yes			
CO [ppm]  BOILER LEFT OPERATING (check corresponding box) Yes  No  No  No  No  No  No  No  No  No  N	Maintenance problems discussed with the end user are to be addressed at no cost to Triangle Tube. Further action(s) required with the boiler or heating system? No ☐ Yes ☐ (If <b>Yes</b> , please attach explanation to the form or use the back of the form)			