

*The following checklist is a guide. It may be used in its entirety or be modified to the specific user's needs by adding or subtracting items from the checklist. For questions concerning any item, contact the Office of Environmental Health and Safety.*

**(43) VENTILATION FOR INDOOR AIR QUALITY**

Name: \_\_\_\_\_ Date : \_\_\_\_\_

Location of Inspection: \_\_\_\_\_

<p><b>1. Does your HVAC system provide at least the quantity of outdoor air required by the State Building Standards Code, Title 24, Part 2 at the time the building was constructed?</b></p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>Comments: _____ _____ _____</p>
<p><b>2. Is the HVAC system inspected at least annually, and problems corrected?</b></p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>Comments: _____ _____ _____</p>
<p><b>3. Are inspection records retained for at least 5 years?</b></p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>Comments: _____ _____ _____</p>