



Housing Authority of Thurston County  
1206 12<sup>th</sup> Ave SE • Olympia, WA. 98501  
Tel: (360) 753-8292 • Fax: (360) 586-0038  
[www.hatc.org](http://www.hatc.org)

Tenant Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

**FIREPLACE / WOODSTOVE / CHIMNEY**

I certify that the fireplace or woodstove and chimney have been inspected and/or cleaned within the past year and are safe for use.

PLEASE COMPLETE   
N/A

Owner/Manager \_\_\_\_\_ Date \_\_\_\_\_

**HOT WATER HEATER CERTIFICATION**

I certify that the hot water heater has a temperature-pressure relief valve and a discharge line (directed toward the floor or outside of the living area) as a safeguard against build up of steam if the heater malfunctions.

PLEASE COMPLETE   
N/A

Owner/Manager \_\_\_\_\_ Date \_\_\_\_\_

**GAS, PROPANE OR OIL FURNACE OR WATER HEATER**

This certification ensures that the occupant(s) of your rental unit are not exposed to hazards of fire or escaping gasses. This also determines the operating condition of the heating systems. The Housing Authority policy requires that a gas furnace or gas hot water tank be inspected/serviced by a qualified person every TWO years. This applies to heating and water heating units which use gas, oil, or propane.

I certify that the furnace and/or water heater have been inspected within the last two years and are safe for use.

PLEASE COMPLETE   
N/A

Owner/Manager \_\_\_\_\_ Date \_\_\_\_\_

**HARDWIRED SMOKE DETECTOR OR A SMOKE DETECTOR LOCATED OUT OF REACH**

I certify that the smoke detectors have been tested and are functioning correctly.

PLEASE COMPLETE   
N/A

Owner/Manager \_\_\_\_\_ Date \_\_\_\_\_

**MANUFACTURED HOMES: TIE DOWNS**

I certify that the manufactured home is secured and anchored by a tie-down device which distributes and transfers the loads imposed by the unit to appropriate ground anchors so as to resist wind turning and sliding.

PLEASE COMPLETE   
N/A

Owner/Manager \_\_\_\_\_ Date \_\_\_\_\_

