

WETT RECOMMENDED INSPECTION CHECKLIST

Requested by: Scott Carson	Inspection location: ☒ Same as requested or:
Address: 9061 County Road 44 Spencerville, Ontario	Address:
Postal code: K0E 1X0	Postal code:
Phone no's: 613-229-6045	Phone no's:
Inspector's name: Larry Faulkner	WETT no.: 5539
Reason(s) for inspection: House Insurance Email: fire06@hotmail.com	
Level of inspection requested: ☒ Level 1 ☐ Level 2 ☐ Level 3	
Date of request: November 09, 2011 Date of inspection: November 11, 2011.	

WOODSTOVE AND FLUE PIPE

Appliance standard: ☒ ULC S627 ☐ EPA ☐ CSA B415 ☐ Unknown ☐ Uncertified	
Listing agency: ☐ ULC ☐ CSA ☒ WH(ITS) ☐ UL ☒ OTL	
Manufacturer: Pacific Energy Serial Number: 430348 Model: Summit Flue Collar Size: 6"	
Installation manual available: ☐ No ☒ Yes	
Installed by: Owner	Date: ☒ Unknown Approx age: 1 Year
Installed in: ☒ Residence ☐ Mobile Home ☐ Combustible Alcove ☐ Garage ☐ Other:	
Appliance location: ☒ Basement ☐ Main Floor ☐ Other:	
Connected to: ☐ Masonry chimney ☐ With s/s liner ☒ F-B chimney ☐ Other:	

Inspection Results: Indicate inspection results for each component. Code Compliance includes proper use of listed components. N/A = Not Applicable UTI = Unable To Inspect. An inspection can be expected to include some components marked UTI.

CLEARANCES	ACTUAL	REQ'D	CODE COMPLIANCE
1. Combustible side wall			☒ N/A ☐ No ☐ Yes
2. Combustible rear wall	12"	6"	☐ N/A ☐ No ☒ Yes
3. Combustible corner			☒ N/A ☐ No ☐ Yes
4. Top/ceiling	87"	84"	☐ N/A ☐ No ☒ Yes

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CLEARANCES, cont'd	ACTUAL	REQ'D	CODE COMPLIANCE, cont'd
5. Shielding			☒ N/A ☐ No ☐ Yes
6. Ember pad size/material	Cement Floor		☐ N/A ☐ No ☒ Yes
7. Heat protection: floor Front: _____ Sides: _____			☒ N/A ☐ No ☐ Yes ☐ UTI
FLUE PIPE TYPE: ☐ Single wall ☒ Double wall Size: 6" Required Clearance: 6"			
8. Clearances	15"	6"	☐ No ☒ Yes
9. Total length	48"		☐ No ☒ Yes
10. Elbows	1 90°		☐ No ☒ Yes
11. Fastening			☐ No ☒ Yes
12. Expansion joint if vertical			☒ N/A ☐ No ☐ Yes ☐ UTI
13.			☐ N/A ☐ No ☐ Yes ☐ UTI
14.			☐ N/A ☐ No ☐ Yes ☐ UTI
15. Connection to breech pipe			☐ N/A ☐ No ☐ Yes ☐ UTI
16. Connection to FB chimney			☐ N/A ☐ No ☒ Yes ☐ UTI
OTHER CONSIDERATIONS		CODE COMPLIANCE	
17. Alcove approved ☒ No ☐ Yes		☒ N/A ☐ No ☐ Yes	
18. Mobile home approved ☐ No ☒ Yes		☒ N/A ☐ No ☐ Yes	
19. Outdoor air connection ☒ No ☐ Yes Required? ☒ No ☐ Yes		☐ No ☒ Yes ☐ UTI	
18.			
Photos taken: ☐ No ☒ Yes Your file reference: Scott Carson			



Comments and Observations. All non-compliance ratings should be considered for comment. Please attach an additional page(s) for this section.

This checklist contains 2 pages in total. The Inspection Report contains 4 pages in total.

Inspector Signature: _____

Date: November 14, 2011.


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