

CERTIFICATE OF INSPECTION

Solid Fuel Burning Appliances

APPLICANT INFORMATION:

Name:	Building Permit No:
Location:	File Number:
Inspected By:	Date:

APPLIANCE:

Stove Manufacturer: _____

Serial Number: _____ Model Number: _____ Approval Number: _____

Approval Label: UL ULC CSA ICBO EPA Other:

Type of Stove: Free Standing Fireplace/Insert Furnace Pellet Mobile Home Other

Type of Chimney: Metal Masonry

Stove Installed in: House Mobile Home Other: _____ Location: _____

Clearances of Appliance:	Base:	Back:	Left Side:	Front:	Right Side:	Flue:
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Heat Shield Installed: : on Appliance on Wall / Ceiling Not Required

Clearances of Floor / Hearth / Mantle:	Front:	Rear:	Left Side:	Right Side:	Above:
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Recommendations: _____

Clearances of Chimney: Good Unacceptable Height of Chimney: Good Unacceptable

Recommendations: _____

Source of Combusion Air: Good Unacceptable

Recommendations: _____

Carbon Monoxide Detector Installed: Good Unacceptable Location Approved: Yes No

Smoke Detector Installed: Yes No Location Approved: Yes No

Recommendations: _____

WETT Installation Number: _____ Reinspection Required: Yes No Approved for Use: Yes No

Personal information contained on this form is collected under the *Local Government Act* and in accordance with the *Freedom of Information and Protection of Privacy Act* . For questions contact City Hall at 250.426.4211.

Office Use	Date: _____	File Closed: <input type="checkbox"/> Yes <input type="checkbox"/> No	Building Inspector Signature: _____
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