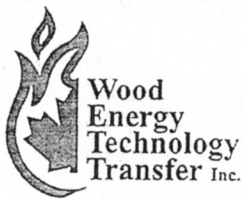


# WETT RECOMMENDED INSPECTION CHECKLIST

Requested by: <b>Nicole Skelton</b>	Inspection location: <input checked="" type="radio"/> Same as requested or:
Address: 1109 Springdale Pk Rd. Bracebridge, ON	Address:
Email: copperfire2002@yahoo.ca	Email:
Phone No.: <b>705-706-8122</b>	Phone No.:
Inspector's name: David Donnelly	WETT No.: 11222
Reason(s) for inspection: Property Transaction	
Level of inspection requested: <input checked="" type="radio"/> Level 1 <input type="radio"/> Level 2 <input type="radio"/> Level 3	
Date of request: <b>Aug. 30, 2017</b>	Date of inspection: <b>Aug. 31, 2017</b>

*Note: inspection results shown are what was present/noted at time of inspection.*

This report documents findings at the time of the inspection. Compliance is referenced to currently published applicable codes and standards.



# WETT RECOMMENDED INSPECTION CHECKLIST

## WOOD STOVE AND FLUE PIPE

Certification Standard:  ULC S627  EPA  CSA B415  Uncertified  Unknown

Listing Agency:  ULC  CSA  WH/ETL  OTL  Other: \_\_\_\_\_

Make: OTL Model: Osburn 2000 Serial #: 1636

Installation manual available:  Yes  No Flue Collar Size: 6"

Alcove approved:  N/A  Yes  No  UTI

Mobile home approved:  N/A  Yes  No  UTI

Installed by: \_\_\_\_\_ Date: Aug. 31, 2017  Unknown: \_\_\_\_\_

Installed in:  Residence  Mobile Home  Combustible Alcove  
 Garage  Other: \_\_\_\_\_

Appliance location:  Basement  Main Floor  Other (specify): \_\_\_\_\_

Connected to:  Masonry chimney  Masonry chimney with stainless steel liner  
 Factory-built chimney  Other (specify): \_\_\_\_\_

Does the unit share a venting system with another appliance:  Yes  No

**Inspection Results:** Indicate inspection results for each component. Code compliance includes proper use of listed components. N/A = Not Applicable UTI = Unable To Inspect.

All non-compliance ratings should be considered for comment.

An inspection at any level can be expected to include some components marked UTI.

CLEARANCES	REQUIRED	ACTUAL(S)	CODE COMPLIANCE
1. Combustible side wall			<input checked="" type="radio"/> N/A <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI
2. Combustible rear wall	6"	22"	<input type="radio"/> N/A <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI
3. Combustible corner			<input checked="" type="radio"/> N/A <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI
4. Top / ceiling	84"	96"	<input type="radio"/> N/A <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI
5. Shielding rear			<input checked="" type="radio"/> N/A <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI
6. Shielding right side			<input checked="" type="radio"/> N/A <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI

Wood Stove and Flue Pipe - page 2

7. Shielding left side			<input checked="" type="radio"/> N/A <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI
8. Shielding corner			<input checked="" type="radio"/> N/A <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI
9. Ember pad / material		Ceramic Tile	<input type="radio"/> N/A <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI
10. Ember pad / front	18"	40"	<input type="radio"/> N/A <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI
11. Ember pad / rear	8"	22"	<input type="radio"/> N/A <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI
12. Ember pad / right side	8"	29"	<input type="radio"/> N/A <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI
13. Ember pad / left side	8"	31"	<input type="radio"/> N/A <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI
14. Ember pad / corner	22"	29"	<input type="radio"/> N/A <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI
15. Radiant heat protection / material		Ceramic Tile	<input type="radio"/> N/A <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI
16.			
17.			
<b>Flue Pipe Type:</b> <input type="radio"/> Single-wall <input checked="" type="radio"/> Double-wall <input type="radio"/> ULC S641 Diameter: 6"			
18. Clearances			<input type="radio"/> N/A <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI
19. Total length		61"	<input type="radio"/> N/A <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI
20. Elbows		none	<input type="radio"/> N/A <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI
21. Fastening			<input type="radio"/> N/A <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI
22. Allowance for expansion			<input type="radio"/> N/A <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI
23. Flue pipe orientation		vertical	<input type="radio"/> N/A <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI
24. Flue pipe slope			<input checked="" type="radio"/> N/A <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI
25. Material		stainless steel	<input type="radio"/> N/A <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI
26. Pipe shielding			<input checked="" type="radio"/> N/A <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI
27. Support			<input type="radio"/> N/A <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI
28.			
29.			
30.			
31. Connection to masonry chimney			<input type="radio"/> N/A <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> UTI
32. Connection to factory-built chimney			<input type="radio"/> N/A <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> UTI

OTHER CONSIDERATIONS	COMMENTS
33. Outdoor air connection	no
34. Carbon monoxide alarm	yes
35. Smoke alarm	yes

Additional information:

Date: Aug 31, 2017

File Reference #: 301

File reference No.: 301

Photos taken:  Yes  No

This checklist contains 5 pages in total. This report contains 5 pages in total.

**Comments and Observations:**

All non-compliance ratings should be considered for comment.

Flue pipe is missing one screw (see image). Ash box requires cleaning.

Please attach additional page(s) for this section.

*Customer Signature:* Nicole Skelton

*Inspector Signature:*

*Digital Signature:* David Donnelly

Digitally signed by David Donnelly  
DN: CN=David Donnelly,  
E=greenlighthomes427@gmail.com, C=CA  
Reason: I am the author of this document  
Location:  
Date: 2017-08-31 12:40:44

*Date:* Aug. 31, 2017

*Date:* Aug. 31, 2017

WETT Recommended Inspection Checklist