



DON INGRAHAM
WETT Inspector

• WOOD STOVES / CHIMNEY • RESIDENTIAL COMMERCIAL
Fire Safety Consultation

8741

INSPECTION REPORT - # 200
SOLID FUEL BURNING APPLIANCES

NAME : Jody Bland
ADDRESS : 6180 40st N.W. Salmon Creek PHONE # 250 804-1713

INSURANCE COMPANY :
ADDRESS : PHONE #

POLICY # :
INSURANCE AGENT :

ADDRESS : PHONE #

STOVE MANUFACTURE RSF ENERGY
SERIAL # : MODEL # Open 2000 APPROVAL # W-11 5705

TYPE OF STOVE FREE STANDING FIRE PLACE WOOD / OIL INSERT
 COOKSTOVE ADD-ON WOOD UNIT CIRCULATING OTHER

TYPE OF CHIMNEY METAL 2100 METAL MASONRY OTHER

HAS A PERMIT BEEN OBTAINED? YES NO
APPROVAL LABEL UL ULC CSA WH ICBO TO B-365 STANDARDS

STOVE IS INSTALLED IN HOUSE MOBILE HOME OTHER
LOCATION OF STOVE : Main floor

TYPE OF SAFETY SHIELD (IF ANY) FLOOR Concrete REAR SIDE
STOVE INSTALLED BY : OWNER

ADDRESS : PHONE #

CLEARANCES : (CONFIRMED BY INSPECTOR) G-GOOD P-POOR SEE ATTACHED
BASE 16 BACK N/A LEFT SIDE 12 FRONT 4 1/2 RIGHT SIDE 36 FLUE N/A

WILL THIS BE THE ONLY STOVE CONNECTED TO THE CHIMNEY? YES NO
IF SO, WHAT OTHER TYPE WILL BE CONNECTED ?

NUMBER CORDS PER YEAR ? 3
LAST CLEANED OCT 2012
CHIMNEY CLEANER Ron Kenonas PHONE # 832-8267

DO YOU HAVE A FIRE EXTINGUISHER? YES NO
DO YOU HAVE A SMOKE DETECTOR? YES NO

ALL RECOMMENDATIONS ARE FILED WITH LOCAL FIRE COMMISSIONER AND YOUR INSURANCE COMPANY AND/ OR INSURANCE AGENT
- DECLARATION -

It is agreed and understood that Osprey Inspection Service assumes no responsibility for any damage that may / not arise or be caused by a fire resulting from the use of said solid fuel burning appliance as described herein. The inspection of the solid fuel burning appliance as described herein by Osprey Inspection Service is for the sole purpose of determining, and to confirm that the said solid fuel burning appliance as described herein has been installed and complies with the installation instructions as set out by the manufacturer, and that the installation meet and exceeds Provincial and/or Municipal Codes, and meets Provincial and / or, Municipal Fire Acts, B.C. Building Code.

J. Bland
INSURED

- CERTIFICATION -

This is to certify that I Don Ingraham did on the day of OCT 27 2012 inspect the solid fuel burning appliance as described herein and do hereby certify that the date of this inspection this solid fuel burning appliance meets and / or exceeds the the manufacturers installation instruction, meets and / or exceeds the Provincial and Municipal Building Codes, meets and/ or exceeds the Provincial and Municipal Fire Codes, National Building and / or Fire Codes.

INSPECTOR : Don Ingraham

RECOMMENDATIONS, IF ANY :



SOLID FUEL HEATING QUESTIONNAIRE

POLICY NUMBER

REPORT DATE

OCT 27/12

6180 40st N.W. Salmon Arm, B.C.

PHOTO REQUIRED YES NO
PHOTO ATTACHED YES NO

INSURANCE COMPANY

INSURED

Jody Blain

AGENT/BROKER

BROKER CLIENT ID#

1. HEATING UNIT

TYPE

MAKE

RSF ENERGY

MODEL

OPEL 2000

AGE

19 yr

- ACORN STOVE, BOX, FRANKLIN OR POT BELLY STOVE (LOOSE FITTING OR NO DOORS) SPACE HEATER OTHER (SPECIFY) _____
- COOKSTOVE WOOD STOVE, AIRTIGHT
- FIRE PLACE INSERT WOODSTOVE, NOT AIRTIGHT
- FIREPLACE, ZERO CLEARANCE WOOD FURNACE
- MASONRY FIREPLACE WOOD FURNACE ADD ON
- PELLET STOVE WOOD / OIL COMBINATION

IS THE UNIT CERTIFIED? YES NO

IF YES, BY:

W-H 5705

- CANADIAN STANDARDS ASSOCIATION (CSA) UNDERWRITERS' LABORATORIES OF CANADA (ULC)
- WARNOCK-HERSEY PROF. SERVICE LTD. OTHER (SPECIFY) _____

ADDRESS OF PREMISES WHERE UNIT IS INSTALLED PRINCIPLE RESIDENCE OTHER (SPECIFY) _____

WHERE IS THE HEATING UNIT LOCATED?

- ATTACHED GARAGE DETACHED GARAGE
- WORKSHOP
- DWELLING (SPECIFY) Main floor
- OTHER (SPECIFY) _____

IS THE HEATING UNIT PRIMARY AUXILIARY HOW OFTEN IS HEATING UNIT USED? NUMBER OF HOURS PER DAY 6 NUMBER OF DAYS PER YEAR AS REQFUEL: WOOD ONLYNUMBER OF CORDS USED ANNUALLY 3 FACE CORD (16" x 4' x 8') STANDARD / BUSH CORD (4' x 4' x 8') WOOD AND OIL PELLET (SPECIFY TYPE) _____ OTHER (SPECIFY TYPE) _____

IF FUEL IS NOT WOOD, SPECIFY AMOUNT BURNED ANNUALLY _____

ARE ASHES DISPOSED OF IN A METAL CONTAINER? YES NO IS THE CONTAINER EQUIPPED WITH A METAL LID? YES NOIS THE ASH CONTAINER PLACED ON A NON-FLAMMABLE SURFACE? YES NOOUT-SIDE

2. CHIMNEY

TYPE

 MASONRYCHIMNEY LINING: FLUE TILE STAINLESS STEEL OTHER (SPECIFY) _____ FACTORY BUILT DOUBLE WALLED METAL CHIMNEY - NAME OF MANUFACTURER _____INSTALLATION BY PROFESSIONAL? YES NO IF YES, NAME OF FIRM _____ UNKNOWN

LABELLED:

 CANADIAN STANDARDS ASSOCIATION (CSA) UNDERWRITERS' LABORATORIES OF CANADA WARNOCK-HERSEY PROF. SERVICE LTD. OTHER (SPECIFY) _____ CONCRETE OTHER TYPE OF CHIMNEY (SPECIFY) _____ UNKNOWN

AGE:

 SAME AS HEATING UNIT OR _____DOES UNIT SHARE A CHIMNEY FLUE? YES NO PROVIDE DETAILS _____

CHIMNEY IS INSTALLED

 INSIDE BUILDING OUTSIDE BUILDING OUTSIDE BUILDING IN INSULATED ENCLOSUREHOW MANY TIMES PER YEAR IS THE CHIMNEY CLEANED? 2DATE OF LAST CLEANING? OCT 2012 BY WHOM? RON KENONASCLEARANCE OF CHIMNEY TO NEAREST COMBUSTIBLES 2 INCHES CENTIMETRESIS CHIMNEY RATED FOR A CONTINUOUS FLUE GAS TEMPERATURE OF 650°C YES NO UNKNOWN



SOLID FUEL HEATING QUESTIONNAIRE

3. CLEARANCES

IMPORTANT

PLEASE COMPLETE THE FOLLOWING CHART. THE ACTUAL CLEARANCE IS WHAT YOU MEASURE, WHEREAS THE REQUIRED DISTANCE IS THAT SPECIFIED IN THE OWNER'S MANUAL OR ON THE LABEL ATTACHED TO THE HEATING UNIT. THE MEASUREMENTS ARE IN:

INCHES OR CENTIMETRES

		ACTUAL	REQUIRED
SHORTEST DISTANCE OF STOVE TO:	BACK WALL	1	1
	SIDE WALL	1	1
	CORNER	1	N/A
	CEILING	1	N/A
SHORTEST DISTANCE OF STOVE PIPE TO:	BACKWALL	1	N/A
	SIDEWALL	1	1
	CEILING	1	1
SHORTEST DISTANCE FROM HEATING UNIT TO EDGE OF FLOOR PAD IN:	FRONT	20	18
	LEFT SIDE	13	8
	RIGHT	13	8
	BACK	N/A	8

IS THERE A THIMBLE WHERE THE PIPE PASSES THROUGH WALL? YES NO

TOTAL LENGTH OF ALL STOVE PIPE (INCLUDING ELBOWS) 0

NUMBER OF ELBOWS IN STOVE PIPE? 0

- CONSTRUCTION OF STOVE PIPE:
- DOUBLE WALLED
 - SINGLE WALLED (INCLUDING BLACK STEEL)
 - GALVANIZED
 - OTHER (SPECIFY) _____

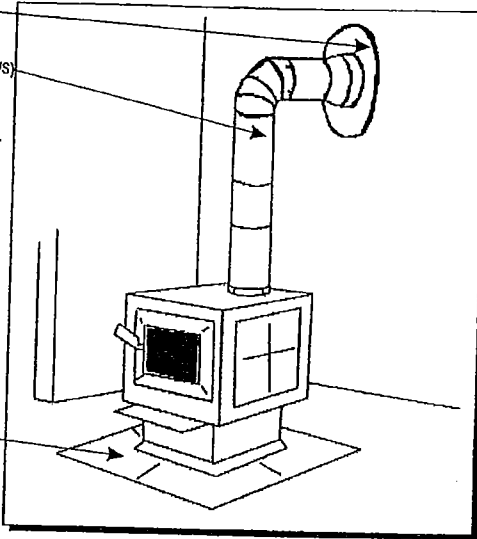
CONSTRUCTION OF SIDEWALL WOOD FRAME

BACKWALL WOOD FRAME

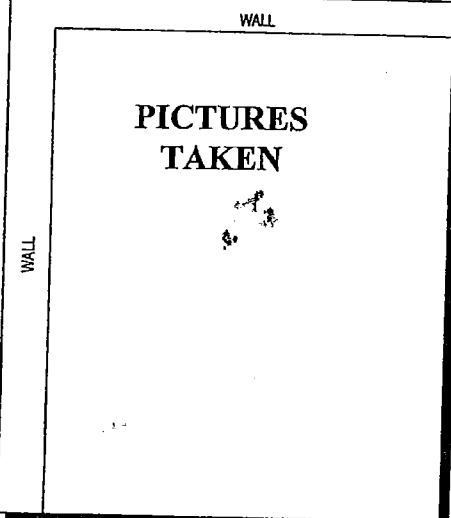
CEILING WOOD FRAME

IS THERE A NON-COMBUSTIBLE PAD? YES NO

SHORTEST DISTANCE OF UNIT TO FURNITURE, FUEL OR OTHER COMBUSTIBLE MATERIAL: _____



DRAW AND LABEL DIAGRAM OF HOW THE UNIT LOOKS



4. INSTALLATION

WHO INSTALLED THE HEATING UNIT? HEATING CONTRACTOR HOMEOWNER OTHER (SPECIFY) _____

IS THE CONTRACTOR WETT CERTIFIED? YES NO

DOES THE STOVE PIPE PASS THROUGH A CONCEALED SPACE/WALL? YES DESCRIBE _____ NO NOT APPLICABLE

TYPE OF SHIELDING: SHEET METAL PERMANENTLY INSTALLED? YES NO CERAMIC TILE BRICK CONCRETE OTHER _____

DISTANCES ARE IN: INCHES CENTIMETRES

DISTANCE FROM WALL TO SHIELD: _____ DISTANCE FROM TOP OF STOVE TO TOP OF SHIELD _____ DISTANCE FROM HEAT SHIELD TO FLOOR _____

ARE THE WALL SPACERS NON-COMBUSTIBLE? YES NO IS THERE AN AIR SPACE AT TOP AND BOTTOM? YES NO IS THE SHIELD ONE INCH FROM THE WALL? YES NO

5. OTHER

HAS THE INSTALLATION, INCLUDING CHIMNEY, BEEN INSPECTED BY SOMEONE WHO IS WETT CERTIFIED? YES NO (EXPLAIN) _____

HAVE ANY MODIFICATIONS BEEN MADE TO THE HEATING UNIT OR CHIMNEY SINCE INSTALLED OR INSPECTED? YES NO (EXPLAIN) _____

6. REMARKS

COMPLETED BY: Don Ingraham WETT # 8741 DATE: Oct 27/12