

# SINGLE FAMILY DWELLING BUILDING PERMIT APPLICATION PACKAGE

The Check Lists/Compliance forms form part of the Building Permit Application package and are required to be completed and returned to the Village Office

The following tables are to be submitted with all Single Family Dwelling applications:

- 1. Building Permit Application
- 2. Agent Approval (if applicable)
- 3. Building Assembly Tables. The completed form is required to be submitted with your Building Permit Application submission.
- 4. Ventilation Checklist Forms 1-3 and Depressurization Test report for Large Exhaust Appliances. The applicable forms are to be completed and returned prior to requesting a **FRAMING INSPECTION.**
- 5. Certification of Plumbing Installation. The completed form is to be submitted prior to requesting an **OCCUPANCY INSPECTION**.

Should you have any questions with respect to the above requirements, please contact the Village office at: 250-347-6455, or email: arne.dohlen@radiumhotsprings.ca



PO BOX 340 4836 RADIUM BLVD. RADIUM HOT SPRINGS, BC VOA 1M0 P.250.347.6455 F. 250.347.9068 www.radiumhotsprings.ca

# BUILDING PERMIT APPLICATION

OFFICE USE ONLY	
BP No	
Year	
Construction Value:	

## **SECTION 1 – APPLICANT INFORMATION**

REGISTERED OW	NER(S):		CONTRACTOR/AGE	NT:
MAILING ADDRE	SS:		MAILING ADDRESS:	
PHONE:	(home) Email:	(work)	PHONE:	Email:
SECTION 2 – Legal Descrip	LAND UNDER APPLICATION	ON		
-		Pla	, <b>n</b>	District Lot
Street Addre				
SECTION 3 –	PURPOSE OF APPLICATION	ON [√ check appro	priate box(es)]	
	ruct a g unit, garage, shop, acce			ccordance with attached plans. shed etc.)
☐ Estimate	ed Construction Value of	Project: \$		
☐ To place	a mobile/manufactured	home		
Year	::Size:		No. of bedrooms	MH Reg#

☐ Other
(wood burning appliance, renovations, plumbing, demolition, moving permit, swimming pool fencing, etc.)
SECTION 4 – ENSURE THE FOLLOWING DOCUMENTS ARE INCLUDED WITH THE APPLICATION
Two (2) sets of construction plans showing:
<ul> <li>dimensions of building</li> <li>scale</li> <li>foundation details</li> <li>floor plans showing         <ul> <li>proposed use of each room</li> <li>elevations</li> <li>structural &amp; mechanical details</li> <li>building sections</li> </ul> </li> <li>list of all building materials</li> <li>One set of plans will be returned to you with Village of Radium Hot Springs comments upon the issuance</li> </ul>
of the permit.
☐ Homeowner Protection Office (provide one of the following):
<ul> <li>Owner/Building Declaration and Disclosure Notice (completed with seal/signature)</li> <li>HPO Registered form (completed with warranty provider seal/signature)</li> <li>(For information contact HPO at 1-800-407-7757 or www.hpo.bc.ca)</li> </ul> Plot Plan – provide plot plan sketch below, which includes the following:
<ul> <li>north arrow</li> <li>lot lines with dimensions</li> <li>location of proposed structure with distances indicated from each structure to each property line</li> <li>access (roads, driveways)</li> <li>all existing buildings on property including the square footage of each structure (if applicable)</li> <li>distances from &amp; elevations above watercourses (creeks, rivers, ponds, lakes)</li> </ul>
PLOT PLAN SKETCH

## **SECTION 5 – DECLARATION AND AUTHORIZATION**

Contaminated Sites Regulatio Statement must be completed	n of the Environmental Managemen d fully and submitted along with this sted form may be forwarded by the \	or activities described in Schedule 2 of the t Act? If this answer is yes, a Site Disclosure Application. Per the <i>Environmental</i> /illage of Radium Hot Springs to the Ministry of
YES □ NO □		
For more information, please	see the Contaminated Sites Regulat	ion or contact the Village Office.
If the permit applied for is gra	anted, I/we agree:	
council and bylaws of the Pro		ant statutes, regulations, rules, orders in llage of Radium Hot Springs, including but not rings Building & Plumbing Bylaw.
plans or specifications, nor in or warranty that the Building system meets any standard o	spections made by a Building Depart Code or the Bylaw have been comp	iew and acceptance of the design, drawings, tment official, shall constitute a representation lied with or the building, structure or plumbing person shall rely on any of those acts as ny standard of construction.
Protection of Privacy Act and		under the <i>Freedom of Information and</i> processing the permit application. For m Hot Springs at 250.347.6455.
I/we have read the above ag	reement, release and indemnify and	understand it.
Signature of Applicant(s):	Name	Date:
	(please print clearly)	
	Signature:	
		Date:
	(please print clearly)	
	Signature:	-
If the application is submitte written authorization:	d by an Agent, the owner(s) must sig	n the following statement or provide separate
I/we consent to this applicat	ion filed by the person or company v	whose name appears as the agent on page 1.
Signature of Owner(s):		Date:

FOR OFFICE USE ONLY:	
FEES: BUILDING	FEES: ENGINEERING & DEVELOPMENT SERVICES
Building Permit: \$ Plumbing Permit: \$ Other: \$	Water: \$Sewer: \$ Damage Deposit: \$



PO Box 340, 4836 Radium Blvd. Radium Hot Springs, BC VOA 1MO P.250-347-6455 F.250-347-9068 www.radiumhotspings.ca

# BUILDING DEPARTMENT OWNER'S APPOINTMENT OF AN AGENT

Re: Property Address:		
Legal Description:	· · · · · · · · · · · · · · · · · · ·	
I am the owner of the above referenced		
Agent:(Print Name)		
(Print Name)		
	¥	
To represent me in an application	for (please check w	here applicable):
☐ Building Permit ☐ Demoli	tion Permit	☐ Plumbing Permit
4		
To view or receive copies of:		
$\square$ Correspondence and/or Permits	☐ Permit Plans	
	2	99
Owner's information:		,
Name:	Signature:_	·
Name:	Signature:_	
Address:		
Telephone:	Date:	

## **ASSEMBLY TABLES**

HDV	INICT	110	ED3

YES 🗆	
152 LJ	

NO □

		Typical Flat Celling Assem	ibly			
	Material	Thickness (mm)	RSI	R	RSI required/ NO HRV	RSI required/ HRV
Outside air film			0,03	0.17		
Roofing				<del></del>		
Strapping						
Sheathing membrane				<del></del>		
Sheathing						
Insulation above trusses				·		
Truss spacing						
Bottom chord height				-		
Insulation between bottom chords						
Vapour barrier			·			
Gypsum board						
Interior air film			0.11	0,62		
Other						
Other						
Other						
Other						
Other						
Other						
•	Total Effective RSI/R of entire a	issembly	0.14	0.79	8.67	8.67

Note: Materials installed towards the exterior of a vented air space cannot be included in the calculation of effective thermal resistance of the assembly

	1	Typical Vaulted Celling Ass	Citibily		DCI I/NO	DCI
	Material	Thickness (mm)	RSI	R	RSI required/ NO HRV	RSI required/ HRV
Outside air film			0.03	0.17		
Roofing						
Strapping			*******			
Sheathing membrane	- Contraction was a second sec					
Sheathing						
Insulation above trusses						
Truss spacing						
Bottom chord height						
Insulation between bottom chords		J				
Vapour barrier						
Gypsum board						
Interior air film			0.11	0.62		
Other						
Other						
Other						
Other						
Other						
Other						
	Total Effective RSI/R of entire	assembly	0.14	0.79	4.67	4.67

Note: Materials installed towards the exterior of a vented air space cannot be included in the calculation of effective thermal resistance of the assembly

		Typical Wall Assemi	oly			
	Material	Thickness (mm)	RSI	R	RSI required/ NO HRV	RSI required/ HRV
Outside air film		1	0.03	0.17		
Cladding						
Strapping						
Sheathing Membrane		PATE 1844   Pate 1				
Sheathing						
Stud wall						
Insulation		ا				
Vapour barrier						
Gypsum board (mm)						
Interior air film			0.12	0.68		
Other						
Other						
Other						
Other						
Other						
Other						
Other						
Other						
Other						
	Total Effective RSI/F	l of entire assembly	0.15	0.85	3,08	2,97

i i

		Typical Floor Assembly Over Unhe		1	RSI required/ NO	RSI required/
	Material	Thickness (mm)	RSI	R	HRV	HRV
Interior air film			0.16	0.91		
Flooring material						
Underlay						
Sheathing						
Alr barrier						
Vapour barrier						
Joist spacing						
Insulation						
Gypsum (mm)		·	***************************************			
Outside air film	***************************************		0,03	0.17		
Other						
Other						
Other						
Other						
Other						
Other						
	Total Effective RSI/R o	f entire assembly	0,19	1.08	4.67	4,67

		Typical Foundation Wall As	sembly			
	Material	Thickness (mm)	RSI	R	RSI required/ NO HRV	RSI required/ HRV
Outside air film			0.03	0.17		
insulation				-		
Damp proofing				tank at the tank		
Concrete						
Joist spacing			-			
Insulation						
Vapour barrier						
Interior air film			0.12	0,68		
Other					<u> </u>	
Other						
Other						
Other	A STATE OF THE STA					
	Total Effective RSI/R of enti	re assembly	0.15	0.85	2.98	2.98

# Ventilation Checklist 1—Forced Air Systems Sentence 9.32.3.4(2)

Civic Address_						Pe	rmit No	
Climate Zone:		Number of Bedrooms			(12)	window (min	s a room with imum dimensic osing interior de	ons apply), a
	Total Fl	oor area of living space		ft²	(B)	orogot and a or	oping measure -	
•	Total Interi	ior Volume of Dwelling		ft <sup>3</sup>			includes all h ling crawlspace	
.5 ACH (air c	hanges/hr)	$= Volume \times 0.5 \div 60 =$			(C)		ances exceeding require make-up	
Dringing W	antilation	System Exhaust Fan M	Tinimum	Air-ff	ow R	ate		
· Use the bedro	om count fi	rom Box (A) and Total sq	uare foota	ge from	n Box	(B) above a	nd Table 9.3	2,3.5. to
determine <b>Minim</b>	um Requi	rėd Prinicpal Exhaust	System (	Capac	ity		cfm (D	)
2. Principal S			•				<b>4</b>	<b>79.</b> .!
a) Exhaust Fa	an continu	ious running Make			odel_		Sone	Rating
		•		apacit		- c.	(17) 36.44	L-> th Day (C)
Location: _				0.2 E		cfr	→ ` ′	be≥than Box (D
7 These Desch C	in and Tu	quivalent Length	Щ	CBV,	capaci	ty @0.4ESF		
a) Installed		_					Ţ	
		_ft + Ext. hood 30 ft +	( #p	lhows	at 10	ft each =	)=	ft (F)
b) Choose t			π υ.	Flex	duct [	or Rigi	d (smooth)	
		t. Now Box E cfm through	Box Fee					
Just Size Tell	e 9 32 3 8	(3) to determine duct size	7.B.	142,142.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	~B		in Ø
		d Bathroom Exhaust I		list be	Jow i	f Principal	– Exhanet Far	n meets all
4. Required F part of Kitche	n/Bathroor	n spot Exhaust requiren	ients.	·IISt DC	AOW I	T I IIIO.par	LIMITED I CO	II Moots till (
	REQUIRED	E	TZUAITX	EQUII	MEN'	r		
	EXHAUST	Spot Exhau	ıst Kitchen	& Bath	WAL	L/CBILING	FANS	Ex.Fan/CE
					. (1)	g per Table 9	(32.3.8.(3)	Principal
TOOM	RATE . Table	Fan Make & Model	CFM					
ROOM	1 1	Fan Make & Model		*Duot D rigid	ia (in Ø		Installed Equiv, Length	System CFA
ROOM .	Table	Fan Make & Model	@ 0.2 ESP Manf.	Duct D	ia (in Ø	) Max, Equiv. Length per	Installed Equiv,	
ROOM .	Table	Fan Make & Model	@ 0.2 ESP Manf.	Duct D	ia (in Ø	) Max, Equiv. Length per	Installed Equiv,	
ROOM .	Table	Fan Make & Model	@ 0.2 ESP Manf.	Duct D	ia (in Ø	) Max, Equiv. Length per	Installed Equiv,	
ROOM .	Table	Fan Make & Model	@ 0.2 ESP Manf.	Duct D	ia (in Ø	) Max, Equiv. Length per	Installed Equiv,	
ROOM	Table	Fan Make & Model	@ 0.2 ESP Manf.	Duct D	ia (in Ø	) Max, Equiv. Length per	Installed Equiv,	

5. Fresh Air must be ducted from outside to Return Air of Forced Air Heating  a) Ventilation air duct is connected not more than 15ft, nor less than 10ft upstream of the l	
device is used.	loading application, almost a non-control
b) Duct Size for Fresh Air intake to RA. Choose one. Rigid Duct: 4" Ø minimum, must be insulated & vapour barriered for full length, OR	
Hex Duct: 5" minimum, must be insulated & vapour barriered for full length.	
6. Forced Air Heating System is ducted to supply air to every bedroom and a	ny level without a bedroom.
7. If Heated Crawlspace present, (Choose one)	
Minimum of one RA grille located in the crawlspace, OR	, or or or
No RA grille in crawlspace, choose ventilation Option 1, 2, or 3 per sentence 9.3	31.3.1 (2) ·
MAKE-UP AIR Requirements	7 77 100 (
1. NAFFVA (Naturally Aspirated Fuel Fired Vented Appliance) or radon present in No, Omit Steps 2 & 3	dwelling unit? (per Sentence 9.32.4.1)
Yes, Proceed to Step 2	•
2. Exhaust Appliance present which exceeds Box C 0.5 ACH:	
No such appliance, Omit Step 3	
Yes, Commit to Depressurization Test (See CAUTION, TECA Vent Manual pg	24)
Yes, Proceed to Step 3	
3. Use Active Make-up Air for Exhaust Appliance. (Choose a or b)	Latina Marta Wall Clare
	Actual Installed Cfm (ake-up Air Fan Cfm
Prot dispertant inches	and up the x an old
Duct diameterinches	
Fan Location Fan ducted to  a) Active Make-up Air delivered to an Unoccupied Area first (not directly to room	m containing the appliance).
i) Tempering Required per 9.32.4.1.(4)(a):	S Att.
Show calculation how make-up air will be tempered to at least 34°F (1°C) bef	
Make-up Fan cfmX 1.08 X (34° F –°F Winter Design Temp y	your location) = (kw)
3412 BTUH/kw	Duct Heater
ii) Transfer Grill Required: Size 1 sq in of gross area per 2 cfm: Transfer grill siz	esq. in. Location
iii) Additional Tempering Required per 9.32.4.1.(4)(b) before transfer to occupie	d area: Show calculation and describe
how make-up air will be further tempered to at least 54°F (12°C).	CL NTT at Common and a management
	(kw) Heat from unoccupied area
3412 BTUH/kw	required to raise temp by 20°F
Tempered by:  OR b) Active Make-up Air delivered to an Occupied Area: Tempering Require	Show colorated when well and a single E.
he tempered to at least 54°F (12°C)	•
Make-up Fan cfmx 1.08 x (54° F –°F Winter Design Temp	your location) =(kw)
3412 BTUH/kw	Duct Heater
	•
	© March 2015 TECA All Rights Reserved
Installer Certification:	2012 TECA Ventilation
I hereby certify that the design and installation of the ventilation system complies with the 2012 B.C. Building Code, 2014 Section 9.32 Amendment.	Certification Stamp
Compiles Will the 2012 Die. Dunding Code, 2017 Booken 7.521 International	
Date	
m L cov	·
Print Name	
Signature .	
Company	
Phone	
Checklist 1, page2of2	
	entilation Guidelines 27

## 2014 Amendment to Section 9.32 Ventilation

## Ventilation Checklist 2—HRV Systems Sentence 9.32.3.4 (3) & (4)

Use this checklist when a centrally ducted HRV (heat recovery ventilator) is used alone or in combination with a Forced Air Heating System to meet principal ventilation system requirements.

Civic Address	Permit No					
Climate Zone: Number of Bedrooms	window (minimum dimensions apply), a					
Total Floor area of living spac	e $ft^2$ (B)					
Total Interior Volume of Dwellin	Total volume includes all heated interior spaces (including crawlspace if heated).					
.5 ACH (air changes/hr) = Volume x 0.5 ÷ 60 :	Exhaust appliances exceeding  cfin (C) .5 ACH may require make-up air.					
1. Use the bedroom count (Box A above) and total square footage (Box B above) to determine the minimum principal Air Flow rate required by Table 9.32.3.5  Minimum Required Rate cfm (D)						
2. HRV Make	_Model					
3. HRV Capacity: CFM @ 0.4 ESP. Box E must	t meet Box D requirement. cfm (E)					
4. List Exhaust Grilles Locations: 1 minimum	@ 6 ft or higher from floor of uppermost level.					
5. Required Kitchen and Bathroom Exhaust If HRV used to meet all or part of Kitchen/Bath						
REQUIRED	EXHAUST EQUIPMENT					
EXHAUST CONTRACTOR SHAPTIVES	isst Vitchen & Beth WALL CETTING FANS HRV					

	REQUIRED	· E	XHAUST	EQUI	PMENT		•	
	EXHAUST	Spot Exhat	ıst Kitcher	& Bath	WALL	/CEILIŃĠ	FANS:	HRV
ROOM	Table	Fan Make & Model	CFM	*Duc	t Sizing	per Table 9	9.32.3,8,(3)	Principal
KOOM	9,32,3,6		@ 0.2 ESP Manf.			Max. Equiv. Length per	Installed Equiv.	· System CFM
			Rated	rigid	flex	table '	Length	
<u> </u>	<del> </del>							
ļ	-					ļ		
]						]		•
·		•						
,		,						
<b></b>							· · · · · · · · · · · · · · · · · · ·	
L						<del></del>	TOTAL	

<sup>\*</sup> For fan capacities exceeding 175cfm in Table 9.32.3.8(3), follow manufacturer's installation instructions or use good engineering practice to size duct. See Ventilation

(must= Box B)

Guidelines Appendix page 16-A, Duct Sizing for Larger Fans. © March 2015 TECA All Rights Reserved Checklist 2, pg1of2

6. HRV Fresh Air Distribution (Choos	e a or b)	
a) Supply Air from HRV direct con	nect to Return Air of a Force	ed Air Heating System:
☐FA system fan and HRV fan continuo		
☐FA system ducted to supply air to eve	ry bedroom and each floor lev	el without a bedroom
b) Supply Air from HRV distribute	d independently	
Ducted to every bedroom and each flo	oor level without a bedroom a	nd
HRV fan continuous operation		
7. If Heated Crawlspace present, (0	Choose one)	•
Minimum of one Forced Air System RA gril		•
No RA grille in crawlspace, choose ventilati	on Option 1, 2, or 3 per sentence 9.3	7.3.7 (2)
MAKE-UP AIR Requirements		
1. NAFFVA (Naturally Aspirated Fuel Fired Ve	nted Appliance) or radon present in	n dwelling unit? (per Sentence 9.32.4.1)
Yes, Proceed to Step 2	•	
2. Exhaust Appliance present which exceeds	Box C 0 5 ACH:	
No such appliance. Omit Step 3	BOX C 0.5 ACII	
Yes, Commit to Depressurization Test (See	CAUTION, TECA Vent Manual pg	(24)
Yes, Proceed to Step 3		
3. Use Active Make-up Air for Exhaust Applia		
Make-up Air Fan required:	Exhaust Appliance	Actual Installed Cfm
Fan Make Mode	ol	Aake-up Air Fan Cfm
Duct diameterinches		
Fan Location  a) Active Make-up Air delivered to an Unocc	Fan ducted to	
	cupled Area first (not directly to roo	om containing the appliance).
<ul> <li>i) Tempering Required per 9,32.4.1.(4)(a):</li> <li>Show calculation how make-up air will be</li> </ul>	oe tempered to at least 34°F (1°C) be	afore entering unoccupied area
Make-up Fan clinX 1.08 X (34	F F Winter Design Temp	your location) = (kw)  Duct Heater
W Through Call Daving On 1 - h . f.	3412 BTUH/kW	Duct Heater
<ul> <li>ii) Transfer Grill Required: Size 1 sq in of g</li> <li>iii) Additional Tempering Required per 9.32</li> </ul>		
how make-up air will be further tempe		ou area, proof calculation and describe
Make-up Fancfm x		(kw) Heat from unoccupied area .
· 3412 B	TUH/kw	required to raise temp by 20°F
· Tempered by:		
OR b) Active Make-up Air delivered to an C	Occupied Area: Tempering Requir	ed. Show calculation how make-up air will
be tempered to at least 54°F (12°C).		
Make-up Fan cfmx 1.08 x (54°	F –°F Winter Design Temp	your location) =(kw)
. ® March 2015 TECA All Rights Reserved	3412 BTUH/kw	Duct Heater
Installer Certification;	- 8.5	2012 TECA Ventilation
I hereby certify that the design and installation complies with the 2012 B.C. Building Code, 2		Certification Stamp
ompres min the sex sex strading code, s	or pooling 5.52 renormality	
Date		
71.17		
Print Name		
Signature .		
Company	-	
mt		
Phone Charlette 2 and 2	• •	
Checklist 2, pg2of2		
© March 2015 TECA	10 ca \/	antilation Guidalinas 20

# 3

## Ventilation Checklist 3—Distributed CRV Systems Sentence 9.32.3.4(5)

Use this Checklist when a ducted Central Recirculating Ventilator (CRV) is used to meet the fresh air intake and distribution requirements and a Principal Exhaust fan meets the exhaust requirements.

· · · · · · · · · · · · · · · · · · ·	nsmonno	n requirements and a Prii	ncipai ex	naust	Tall II				
Civic Address_						P	ermit No	'	
Climate Zone:	-	Number of Bedrooms			(A)	window (mi		h an openable lions apply), a	
	Total F	loor area of living space		ft²	(B)	closet and a	nosing interior		
r	Total Inte	rior Volume of Dwelling		ft³		Total volume includes all heated interior spaces (including crawlspace if heated).			
.5 ACH (air cl	nanges/hr	) = Volume x $0.5 \div 60 =$		cfm	(C)		liances exceedir require make-1		
1. Principal Ve	ntilation	System Exhaust Fan M	Tinimum	Air-f	low R	late	,		
-		from Box (A) and Total sq					and Table 9.3	32,3,5, to	
		ired Prinicpal Exhaust	System (	Capac	city		cfm (I	) 	
2. Principal Sy				76.7	lodel	•	, done	Rating	
a) Exmansi ra	и сопии	uous running Make	r	apaci			20116	Raung	
Location:				араст : 0,2 Е		cfm (	E) Must be≥tl	an Box (D)	
Location.					L_	ty @0,4ES	•		
3. Fan Duct Si	ze and E	quivalent Length		CLITY	oupaoi	.cj e 0, 120.			
a) Installed l	Equivalen	t Length:							
Length of	duct	ft + Ext, hood 30 ft +	( <u></u> # e	lbows	at 10	ft each =_	) = [	ft (F)	
b) Choose ty	pe of due	et:		Flex	duct	or Rig	id (smooth)	duct [	
c) Duct size	required	to flow Box E cfm throug	gh Box F	equiv	alent	length of o	luct = [		
Use Table	9.32.3.8	(3) to determine duct siz	œ.					in Ø	
		ıd Bathroom Exhaust F m spot Exhaust requirem		list be	olow i	f Principal	Exhaust Fa	n meets all o	
	REQUIRED	В	XHAUST	EQUI	PMEN	Т			
	Exhaust	Spot Exhau	st Kitchen	& Bath	WAL	L/CBILING	FANS	Ex,Fan/CEV	
	RATE Table	Fan Make & Model	CFM			g per Table !		Principal	
ROOM	9.32.3.6	2 012 2120 00 2120 00 2	1 ~ 4 h	Duct D rigid			Installed Equiv. Length	System CFM	
						14070			
						\			
						·			
	<u> </u>				1				
		eding 175cfm in Table 9.32					TOTAL (must=		
		ruse good engineering pra					Box E)	<u> </u>	
Guidelines Appe	ndix page 1	6-A, Duct Sizing for Larger F	cans. ©	Varch 2	015 TE	CA All Rights	Reserved Ch	necklist 3, pg1of	

5. CRV Fresh Air Intake & Mixing Fan (Choose a or b)	
a) Box F CFM is minimum 2 times Box E cfm for +5°F and warmer winter design	
b) Box F CFM is minimum 3 times Box B for less than +5°F winter design temp	erature.
Make Model Capacity @	
c) Duct Size for Fresh Air intake into return air of CRV: 0.4 ESP	cfm (F)
Min 4"Ø rigid duct, must be insulated & vapour barriered for full length, OR	
Min 5"Ø, flex duct, must be insulated & vapour barriered for full length,	
6. CRV Fresh Air Circulation (Choose a or b)	
a) Draw air from bedrooms and Supply air to common area.	
b) Draw air from common area and Supply air to bedrooms.	
7. If Heated Crawlspace present	
Choose ventilation option 1, 2, or 3 per sentence 9.37.3.7 (2).  MAKE-UP AIR Requirements	·
1. NAFFVA (Naturally Aspirated Fuel Fired Vented Appliance) or radon present in	dwelling unit? (per Sentence 9.32.4.1)
No, Omit Steps 2 & 3	
Yes, Proceed to Step 2.	
2. Exhaust Appliance present which exceeds Box C 0.5 ACH:	
No such appliance. Omit Step 3	•
Yes, Commit to Depressurization Test (See CAUTION, TECA Vent Manual pg 2	24)
Yes, Proceed to Step 3	
3. Use Active Make-up Air for Exhaust Appliance, (Choose a or b)	•
Make-up Air Fan required: Exhaust Appliance A	actual Installed Cfm
Fan Make Model Ma	ake-up Air Fan Cfm
Duct diameterinches	
Fan Location Fan ducted to	
a) Active Make-up Air delivered to an Unoccupied Area first (not directly to room	n containing the appliance).
i) Tempering Required per 9.32.4.1.(4)(a);	,
Show calculation how make-up air will be tempered to at least 34°F (1°C) before	ore entering unoccupied area.
	- ·
Make-up Fan cfmX 1.08 X (34° F –°F Winter Design Temp y	our location) =(kw)
Make-up Fan cfmX 1.08 X (34° F –°F Winter Design Temp y	our location) = (kw) Duct Heater
Make-up Fan cfmX 1.08 X (34° F –°F Winter Design Temp you 3412 BTUH/kw ii) Transfer Grill Required: Size 1 sq in of gross area per 2 cfin: Transfer grill size	our location) = (kw)  Duct Heater  sq. in. Location
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## CERTIFICATION OF PLUMBING INSTALLATION

This form is for use by certified plumbers who have attained their British Columbia Tradesman Qualification Certification or Interprovincial Certification.

I, \_\_\_\_\_\_\_B.C. Tradesman

(Print Name)			
Certification No of(Company Name)			***************************************
hereby certify that I installed and tested the following plumbing	ng system at:	:	
(address of property)			
for under Building Permit	t No		-
(Owner's Name)  The installation was tested in accordance with good trade practice a Plumbing Code, Division B, Part 2, including materials and equipmen		with the curre	nt edition of the BC
Check off the appropriate test and have both columns signed, then submit to the Building Inspector	Init	ial in Applical	ole Spaces
TYPE OF TEST	PLUMBER	OWNER/ AGENT	TEST DATE (D/M/Y)
Testing of underground DWV system, as required under Division B, Part 2, Subsection 2.3.6 of the BC Plumbing Code			
☐ Static water test – 3m column of water required for 15 minutes			
☐ Air Test – 15 minutes at 35kPa (5 psi)			
Testing of the Potable Water System, as required under Division B, Part 2, Subsection 2.3.7 of the BC Plumbing Code			
$\square$ Water pressure test to 700kPa (100 psi) or,			
<ul> <li>Air pressure test to 700kPa (100 psi) for at least 2 h without pressure drop</li> </ul>			
Testing of aboveground DWV system, as required under Division B, Part 2, Subsection 2.3.6 of the BC Plumbing Code			
☐ Static water test – 3m column of water required for 15 minutes			
☐ Air Test — 15 minutes at 35kPa (5 psi)			
Other Systems: (describe)			
Backflow Prevention Type: SewerWaterline		•	

Submission of this form in no way waives your responsibility to have the plumbing system inspected at the required inspections listed on the Permit.