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Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
Website: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_

**REQUESTED BY:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_

Inspector's name: \_\_\_\_\_

Reason(s) for inspection: \_\_\_\_\_

Type of inspection requested:  Visual  Technical  Invasive

Date of request: \_\_\_\_\_

**INSPECTION LOCATION:**  Same as requested or:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_

WETT #: \_\_\_\_\_

Date of inspection: \_\_\_\_\_

- 1. Visual Inspection:** This inspection includes the following:
  - a. Measurements of clearances.
  - b. Opening stove doors and all ground-accessible dampers/clean-out doors.
  - c. Visual inspection of the chimney from the ground.
  - d. WETT report documenting all noted deficiencies and red flags that may require a more detailed inspection, including all mandatory photos in the WETT Inspection Standards of Practice (SOP).
  - e. Easily visible portions of the flue (such as first tiles of an open fireplace or top section if the inspector has accessed the roof).
- 2. Technical Inspection:** This inspection includes the following:
  - a. All visual elements of the system as indicated in **Visual** Inspection.
  - b. Hands-on work which may include:
    - i. Taking apart flue pipes,
    - ii. Opening clean-outs,
    - iii. Entering the attic to view additional system components,
    - iv. Accessing the chimney on the roof.
  - c. Review of condition of components removed or exposed through hands-on work and quantity of creosote noted in components and where visible in chimney sections.
  - d. All observations and recommendations documented on WETT Inspection forms, including work completed and areas accessed, along with all mandatory photos.
- 3. Invasive Inspection:** This inspection includes the following:
  - a. All visual elements of the system as indicated in **Visual** Inspection.
  - b. All hands-on work as indicated in **Technical** Inspection.
  - c. General construction work to building elements including:
    - i. Opening of walls or ceilings,
    - ii. Disassembly or invasive work on masonry or prefab chimneys,
    - iii. Examination of chimney liners,
  - d. All observations and recommendations documented on WETT Inspection forms, including work completed and areas accessed, along with mandatory photos.

- **Inspection Results:** Indicate inspection results for each component. **Code compliance** = proper use of listed components. N/A = Not Applicable. UTI = Unable To Inspect.
- **Suitable (Suitability)** refers to system components that appear to be mechanically and structurally able to provide their designed and intended function.
- **Unsuitable** refers to components, or parts thereof, that are not mechanically or structurally suitable to maintain the function they were intended to perform.  
Note: an appliance that has been modified is no longer a certified appliance.
- This inspection report only documents the conditions at the time of inspection.
- All **non-compliance** ratings should be considered for comment. See "Comments" page(s)
- An inspection, at any level, can be expected to include some components marked **UTI**.
- Manufacturer's specific instructions/**CSA B365**/building code shall be used to complete this inspection form.
- Appliances are not fired as part of an inspection. This is not a performance inspection.
- The electrical system is not part of a solid-fuel inspection
- Documentary evidence, including a valid certification number of the attending WETT-certified professional, is a mandatory requirement of the inspection process.
- Persons signing a declaration must have physically inspected the work.
- Use one inspection form per appliance. In a multi-chimney situation, this inspection form is limited to the related appliance.
- Inspectors are checking for "**Code Compliance**." They do not "Pass" or "Fail."
- Inspectors do not certify the appliance or the installation.
- Inspectors do not issue a WETT certificate with an inspection, they issue an inspection report.



## WOOD STOVE, FLUE PIPE (CSA B365-17) & MANUFACTURED CHIMNEY

<b>Has the type of inspection been discussed prior to inspection?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Appliance Make/Model/Serial #:</b> _____
<b>Are copies of building permit/s available?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Installation manual available:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Original <input type="checkbox"/> Web download
<b>Time of day:</b>	<b>Certification Standard:</b> <input type="checkbox"/> ULC S627 <input type="checkbox"/> EPA <input type="checkbox"/> CSA B415 <input type="checkbox"/> Uncertified <input type="checkbox"/> Unknown
<b>Weather conditions</b> (ice, snow, wind, rain, thunderstorm, sunny):	<b>Listing Agency:</b> <input type="checkbox"/> ULC <input type="checkbox"/> CSA <input type="checkbox"/> WH/ETL <input type="checkbox"/> OTL <input type="checkbox"/> Other/Comments: _____
<b>Roofing type/material:</b> _____	<b>Alcove approved:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Roof accessed?</b> <input type="checkbox"/> Yes _____ <input type="checkbox"/> No <b>Attic accessed?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Mobile home approved:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Chimney Make/ Model #:</b> _____	<b>Flue Collar Size:</b> _____
<b>Installation manual available:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Original <input type="checkbox"/> Web download	<b>Is there a fan or blower attached?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Listing Agency:</b> <input type="checkbox"/> ULC <input type="checkbox"/> CSA <input type="checkbox"/> WH/ETL <input type="checkbox"/> OTL <input type="checkbox"/> Other: _____ <b>Flue size:</b> _____	<b>Comments/condition of appliance</b> (baffle plate, air tubes, bricks, gaskets, etc.): Suitable <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Certification Standard:</b> <input type="checkbox"/> ULC S604 <input type="checkbox"/> ULC S629 <input type="checkbox"/> Other: _____ <input type="checkbox"/> Unknown	<b>Installed in:</b> <input type="checkbox"/> Residence (Part 9) <input type="checkbox"/> Modular Home (A277) <input type="checkbox"/> Mobile Home/Manufactured (Z240) <input type="checkbox"/> Alcove <input type="checkbox"/> Garage <input type="checkbox"/> Other: _____
<b>Comments/Condition of chimney</b> (dents, corrosion, perforations, heat marks on outer wall, distortion, bulging, misaligned inner liner sections) <b>Suitable</b> <input type="checkbox"/> Yes <input type="checkbox"/> No (See notes)	<b>Comments/Condition of Appliance</b> (baffle plate, air tubes, bricks, gaskets, etc.): Suitable <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Inside installation <input type="checkbox"/> Outside installation <b>Total height:</b>	<b>Appliance location:</b> <input type="checkbox"/> Basement <input type="checkbox"/> Main Floor <input type="checkbox"/> Other (specify): _____
<b>Chimney Installed by:</b> _____ <b>Date:</b> _____ <input type="checkbox"/> Unknown	<b>Appliance Installed by:</b> _____ <b>Date:</b> _____ <input type="checkbox"/> Unknown
<b>Does the unit share a venting system with another appliance?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	



## WOOD STOVE, FLUE PIPE (CSA B365-17) & MANUFACTURED CHIMNEY

<b>CLEARANCE TO</b>	<b>REQUIRED</b>		<b>ACTUAL</b>	<b>CODE COMPLIANCE</b>	<b>PHOTOS TAKEN</b>
	Uncertified	Certified			
Clearance To: <b>1. Combustible right side wall</b>	Uncertified 36"/ 48"	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Clearance To: <b>2. Combustible left side wall</b>	Uncertified 36"/ 48"	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes

CLEARANCE TO	REQUIRED		ACTUAL	CODE COMPLIANCE	PHOTOS TAKEN
	Uncertified	Certified			
Clearance To: <b>3. Combustible rear wall</b>	Uncertified 36"/ 48"	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Clearance To: <b>4. Combustible corner – right side</b> (45 degrees)	Uncertified 36"/ 48"	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Clearance To: <b>5. Combustible corner – left side</b> (45 degrees)	Uncertified 36"/ 48"	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Clearance To: <b>6. Top/ceiling</b>	Uncertified 60"	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Clearance To: <b>7. Shielding ceiling</b>	Uncertified _____	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Clearance To: <b>8. Wall shielding – rear</b>	Uncertified _____	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Clearance To: <b>9. Wall shielding – right side</b>	Uncertified _____	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Clearance To: <b>10. Wall shielding – left side</b>	Uncertified _____	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Clearance To: <b>11. Ember pad material</b>	Uncertified Continuous, durable, non-combustible	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Clearance To: <b>12. Ember pad – front</b>	Uncertified Minimum – 18"	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Clearance To: <b>13. Ember pad – rear</b>	Uncertified Minimum – 8"	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Clearance To: <b>14. Ember pad – right side</b>	Uncertified Minimum – 8"	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Clearance To: <b>15. Ember pad – left side</b>	Uncertified Minimum – 8"	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Clearance To: <b>16. Radiant heat floor protection material – uncertified appliance</b>	Uncertified CSA B365-17: 8.1.3.2	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Clearance To: <b>17. Radiant heat floor protection material – certified appliance</b>		Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Clearance To: <b>18. Hazardous location</b>	Uncertified CSA B365-17: 4.3	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes

CLEARANCE TO	REQUIRED		ACTUAL	CODE COMPLIANCE	PHOTOS TAKEN
	Uncertified	Certified			
Clearance To: 19. Outdoor combustion air	Uncertified <input type="checkbox"/> Yes <input type="checkbox"/> No	Certified <input type="checkbox"/> Yes <input type="checkbox"/> No	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
20. Is CO alarm present in same room with solid-fuel-burning appliance?	9.32.4.2.3 (BCBC)		Actual <input type="checkbox"/> Yes <input type="checkbox"/> No	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No	Photos taken: <input type="checkbox"/> Yes
21. Is CO alarm present in same room with solid-fuel-burning appliance?	9.32.4.2.3 (NBC/ABC)		Actual <input type="checkbox"/> Yes <input type="checkbox"/> No	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Photos taken: <input type="checkbox"/> Yes
22. Is CO alarm present in same room with solid-fuel-burning appliance?	9.32.4.2.3 (OBC)		Actual <input type="checkbox"/> Yes <input type="checkbox"/> No	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Photos taken: <input type="checkbox"/> Yes

It is the homeowner's responsibility to ensure that the CO alarm is in working condition and installed in accordance with applicable codes.  
NOTE: WETT inspectors do not test the CO alarm, they just note if it is present.



## FLUE Pipe

Flue Pipe/ Connector: Type:  Single-wall  Double-wall  ULC S641 Diameter: \_\_\_\_\_

Manufacturer: \_\_\_\_\_ Model \_\_\_\_\_ Listing Agency: \_\_\_\_\_ Is manual available?  Yes  No

FLUE PIPE/ CONNECTOR REQUIREMENTS	REQUIRED		ACTUAL	CODE COMPLIANCE	PHOTOS TAKEN	
	Uncertified	Certified				
Flue Pipe/ Connector: 23. Wall clearances – right side	Unshielded 18"	Shielded 9"	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Flue Pipe/ Connector: 24. Wall clearances – left side	Unshielded 18"	Shielded 9"	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Flue Pipe/ Connector: 25. Wall clearances – rear wall	Unshielded 18"	Shielded 9"	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Flue Pipe/ Connector: 26. Clearances – ceiling	Unshielded 18"	Shielded 9"	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Flue Pipe/ Connector: 27. Total length	Required Maximum 10'			Actual(s) _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Flue Pipe/ Connector: 28. Elbows	Required Maximum 180°			Actual(s) _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Flue Pipe/ Connector: 29. Fastening	Required 3 screws		Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes

FLUE PIPE/ CONNECTOR REQUIREMENTS	REQUIRED		ACTUAL	CODE COMPLIANCE	PHOTOS TAKEN
	Uncertified	Certified			
Flue Pipe/ Connector: <b>30. Allowance for expansion</b>	Required Elbow/ slip/ adjust		Actual(s) _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Flue Pipe/ Connector: <b>31. Flue pipe orientation</b>	Required Male end down	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Flue Pipe/ Connector: <b>32. Joint overlap</b>	Required Min 30 mm (1-3/16")	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Flue Pipe/ Connector: <b>33. Flue pipe slope</b>	Required Min ¼" per foot	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Flue Pipe/ Connector: <b>34. Material</b> – steel or other non-combustible material with a melting point of not less than 1100 °C (2000 °F)	Required <input type="checkbox"/> Yes <input type="checkbox"/> No	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Flue Pipe/ Connector: <b>35. Minimum thickness of flue pipe</b>	Uncertified _____	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Flue Pipe/ Connector: <b>36. Pipe shielding</b>	Required <input type="checkbox"/> Yes <input type="checkbox"/> No	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Flue Pipe/ Connector: <b>37. Support – horizontal</b>	Required <input type="checkbox"/> Yes <input type="checkbox"/> No	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Flue Pipe/ Connector: <b>38. Flue pipe condition</b>	Required <input type="checkbox"/> Yes <input type="checkbox"/> No	Certified _____	Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Flue Pipe/ Connector: <b>39. Barometric damper</b> CSA B365-17: 4.4.4	Required <input type="checkbox"/> Yes <input type="checkbox"/> No		Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Flue Pipe/ Connector: <b>40. Flue-mounted heat reclaimers</b> CSA B365-17: 4.4.1	Required <input type="checkbox"/> Yes <input type="checkbox"/> No		Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Flue Pipe/ Connector: <b>41. Does the flue pipe pass through floors or ceilings?</b>	Required <input type="checkbox"/> Yes <input type="checkbox"/> No		Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes
Flue Pipe/ Connector: <b>42. Connection to factory-built chimney – Mfr. instructions</b>	Required <input type="checkbox"/> Yes <input type="checkbox"/> No		Actual _____	Code Compliance <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	Photos taken: <input type="checkbox"/> Yes

<b>Component:</b> <b>43. Minimum horizontal extension beyond inside wall surface</b>	<b>Required</b> _____	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes
<b>Component:</b> <b>44. Maximum horizontal extension beyond inside wall surface</b>	<b>Required</b> _____	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes
<b>Component:</b> <b>45. Wall radiation shield</b>	<b>Required</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes
<b>Component:</b> <b>46. Clean-out tee and cap</b>	<b>Required</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes
<b>Component:</b> <b>47. Base tee and cap</b>	<b>Required</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes
<b>Component:</b> <b>48. Wall support/band</b>	<b>Required</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes
<b>Component:</b> <b>49. Distance between supports</b>	<b>Required</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes
<b>Component:</b> <b>50. Chimney offsets</b>	<b>Required</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes
<b>Component:</b> <b>51. Offset support</b>	<b>Required</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes
<b>Component:</b> <b>52. Firestopping</b>	<b>Required</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes
<b>Component:</b> <b>53. Ceiling support</b>	<b>Required</b> <input type="checkbox"/> Flat <input type="checkbox"/> Cathedral	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes
<b>Component:</b> <b>54. Minimum vertical extension below ceiling</b>	<b>Required</b> _____	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes
<b>Component:</b> <b>55. Attic radiation shield</b>	<b>Required</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes
<b>Component:</b> <b>56. Is attic radiation shield above insulation level?</b>	<b>Required</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes
<b>Component:</b> <b>57. Other radiation shield(s)</b>	<b>Required</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes
<b>Component:</b> <b>58. Enclosed through living space</b>	<b>Required</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes

<b>Component:</b> 59. Roof flashing/storm collar	<b>Required</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes
<b>Component:</b> 60. Rain cap	<b>Required</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes
<b>Component:</b> 61. Rain cap spark arrestor	<b>Required</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes
<b>Component:</b> 62. Roof braces	<b>Required</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes
<b>Component:</b> 63. Roof brace solidly anchored	<b>Required</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes
<b>Component:</b> 64. Height above roof surface	<b>Required</b> Min – 900 mm (3’/36”)	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes
<b>Component:</b> 65. Height within 3 m (10’)	<b>Required</b> Min – 600 mm (2’/24”)	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes
<b>Component:</b> 66. Cap height above chase cap	<b>Required</b> _____	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes
<b>Component:</b> 67. Chimney clearance to combustibles	<b>Required</b> _____	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes
<b>Component:</b> 68. Other areas of chimney enclosed or hidden	<b>Required</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Actual</b> _____	<b>Code Compliance</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<b>Photos taken:</b> <input type="checkbox"/> Yes

69. **Fire Code = 2.6.1.4. Chimneys, Flues and Flue Pipes**  
(1) Every chimney, flue and flue pipe shall be inspected to identify any dangerous condition  
a) at intervals not greater than 12 months, b) at the time of addition of any appliance, and c) after any chimney fire.
70. **Fire Code = 2.6.1.4.**  
(2) **Chimneys, Flues and Flue Pipes** shall be cleaned as often as necessary to keep them free from dangerous accumulations of combustible deposits.

**Appendix A – A.2.6.1.4 (2)** The presence in a chimney of deposits of soot or creosote in excess of 3 mm thick will indicate the need for immediate cleaning, possible modification of burning procedures and more frequent inspections.

71. **Fire Code = 2.6.1.4 3)** A chimney, or flue pipe shall be replaced or repaired to eliminate  
a) any structural deficiency or decay

**Appendix A – A.2.6.1.4 (3) (a)** Structural deficiencies are deviations from required construction, such as the absence of a liner or inadequate design of supports or ties. Instances of decay are cracking, settling, crumbling mortar, distortion, advanced corrosion, separation of sections, or loose or broken supports

72. **Fire Code = 2.6.1.4. 3)** A chimney, flue, or flue pipe shall be replaced or repaired to eliminate  
b) all abandoned or unused openings that are not effectively sealed in a manner that would prevent the passage of fire or smoke.



File reference #: \_\_\_\_\_

Photos taken:     Yes     No Numbers of photo: \_\_\_\_\_

This checklist contains: \_\_\_\_\_ pages in total | This report contains: \_\_\_\_\_ pages in total.

**Comments and observations:**

All non-compliance ratings should be considered for comment. Add number of non-compliance line. More pages may be added.

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Please attach additional page(s) if needed

Customer signature: \_\_\_\_\_

Inspector signature: \_\_\_\_\_

Inspector WETT #: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

**PHOTOS:**

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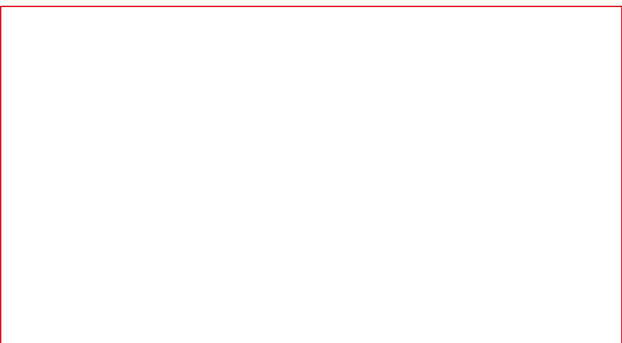
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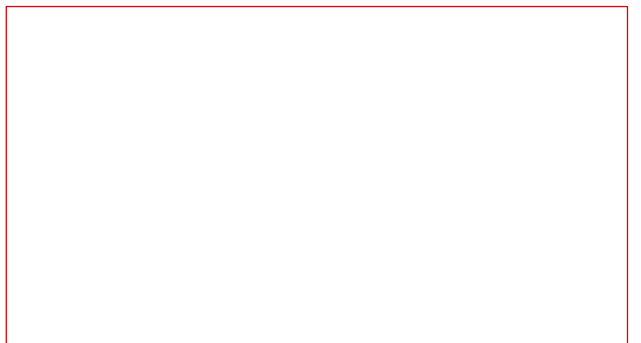
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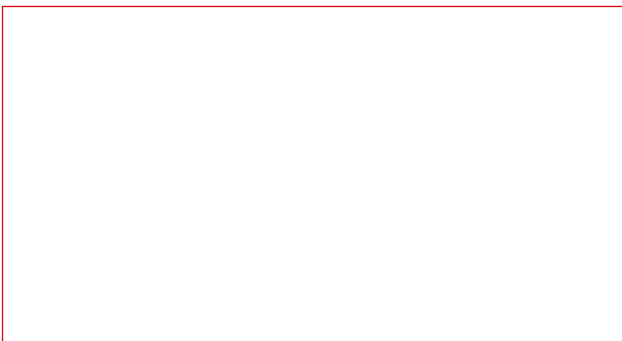
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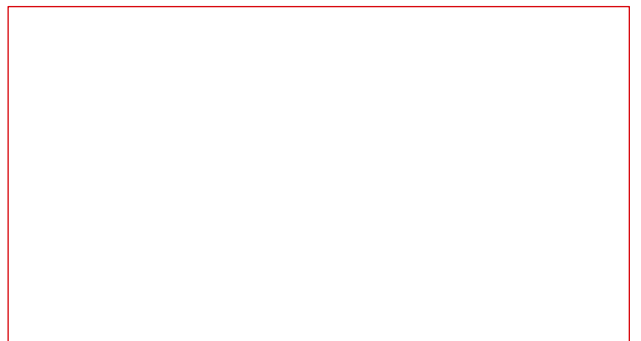
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