

Project Address:

Builder Name:

BP #:

Please initial all applicable boxes and fill in all required information. It is the responsibility of the builder and ventilation contractor to ensure this certification is attached to the furnace prior to the request for the final inspection.

PRINCIPAL VENTILATION FAN	<p>Normal Operating Exhaust Capacity (NOEC) of Principal Ventilation Fan (1 L/s = 2.119 cfm)</p> <table border="1" style="width:100%; border-collapse: collapse; margin-bottom: 10px;"> <tr> <td style="width:20%;">Number of bedrooms</td> <td style="width:10%;">1</td> <td style="width:10%;">2</td> <td style="width:10%;">3</td> <td style="width:10%;">4</td> <td style="width:10%;">5</td> </tr> <tr> <td>Minimum capacity (L/s)</td> <td>16</td> <td>18</td> <td>22</td> <td>26</td> <td>30</td> </tr> <tr> <td>Maximum capacity (L/s)</td> <td>24</td> <td>28</td> <td>32</td> <td>38</td> <td>45</td> </tr> </table> <p>Number of bedrooms: _____</p> <p>Location of Exhaust Air Inlets: _____ (room name) _____ (room name)</p> <p>_____ (room name) _____ (room name)</p> <p>Initial <input type="checkbox"/> The principal ventilation fan is capable of operation at an exhaust capacity complying with the table above</p> <p><input type="checkbox"/> Activation of the principal ventilation fan automatically activates the forced air distribution system circulation fan or the circulation fan is set to automatically run at set intervals</p> <p><input type="checkbox"/> There are no solid fuel burning appliances (ex. wood fireplaces) and no non-directly or non-mechanically vented appliances (ex. gas ranges) in the house</p>	Number of bedrooms	1	2	3	4	5	Minimum capacity (L/s)	16	18	22	26	30	Maximum capacity (L/s)	24	28	32	38	45	<p>Flow rate of principal exhaust fan(s): <div style="text-align:right; font-size:small;">Low Speed High Speed</div> Room: _____ Capacity= _____ L/s _____ L/s</p> <p>Room: _____ Capacity= _____ L/s _____ L/s</p> <p>If the principal ventilation fan exhausts from the kitchen and other rooms, the high speed must be at least 2.5 times the minimum required capacity</p> <p>Flow rate of the air circulation fan of the forced air distribution system while all exhaust fans are running: _____ L/s</p> <p>Initial <input type="checkbox"/> The capacity of the air circulation fan is at least 5 times the NOEC of the principal ventilation fan</p>	MEASURED AIR FLOWS
	Number of bedrooms	1	2	3	4	5															
Minimum capacity (L/s)	16	18	22	26	30																
Maximum capacity (L/s)	24	28	32	38	45																
<p>ADDITIONAL EXHAUST FANS</p> <p>Room: _____ Capacity= _____ L/s</p> <p>Room: _____ Capacity= _____ L/s</p> <p>The minimum capacity of the kitchen exhaust fan is 50 L/s when not part of the principal ventilation system</p>	<p>I declare that this system has been installed in accordance with requirements of Sections 9.32 and 9.33 of the National Building Code of Canada</p> <p>Installing Company: _____</p> <p>Ventilation Contractor: _____</p> <p>Signature: _____</p> <p>Date: _____</p> <p>Phone Number: _____</p> <p>Email Address: _____</p> <p>HRAI/ ASHRAE #: _____</p>	CERTIFICATION																			

At the final inspection, this form is to be completed and attached to the furnace. A second completed form shall be submitted to the inspector. A balance report may be requested and the inspector may request that they be present during the test.

This form should be submitted directly to Building Standards at inspections@saskatoon.ca