

Date: _____

Building Services

4432 George St, Box 100 Sydenham, ON K0H 2T0 613-376-3027 Ext 2226 building@southfrontenac.net

Building Permit #: _____

PLUMBING INSTALLER TO COMPLETE

Plumbing Contractor:	
Project location/address:	
This will confirm that the plumbing system for the above noted project has been tested and successfully passed the requirements for testing under Section 7.3.6 and 7.3.7 of the Ontario E Code as amended.	Building
 A. DRAINAGE AND VENTING SYSTEMS: All components of the drainage and venting system have passed the following tests: Pressure test using air or water at the rough-in stage in accordance with OBC Set 7.3.6.1(I). Final test using smoke or air pressure after the installation of all fixtures, in accordance with OBC section 7.3.6.1(2) Ball tests on all building drains and building sewers in accordance with OBC Sect 7.3.6.1(5) 	dance
B. POTABLE WATER SYSTEMS: The entire potable water system has passed the pressure test using water or air on the complete system after the installation of all fixtures, in accordance with OBC, Section 7.3.7.1(1).	
This will also confirm that all components of the plumbing system are marked in accordance wirelevant Canadian Standards Association (CSA) as detailed under Section 7.6.2.1(1), and all fix meet the water efficiency requirements detailed under OBC section 7.6.4.	
The plumbing system is complete and ready for operation by the building occupants.	
I have an Ontario "Certification of Qualification (C of Q)" in plumbing: Yes □ No □]
Plumbing Company:	
Name of Plumber:	
(Print) Signature:	_