

TOWNSHIP OF SOUTH FRONTENAC  
BUILDING DEPARTMENT  
P. O. BOX 100, 4432 GEORGE STREET  
SYDENHAM, ONTARIO K0H 2T0  
TELEPHONE: (613) 376-3027 FAX: (613) 376-6657

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PLUMBING INSTALLER TO FILL OUT

DATE: \_\_\_\_\_ BUILDING PERMIT NUMBER: \_\_\_\_\_

PLUMBING CONTRACTOR: \_\_\_\_\_

PROJECT NAME: \_\_\_\_\_

PROJECT 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 Building Code as amended.

A. DRAINAGE AND VENTING SYSTEMS:

All components of the drainage and venting system have passed the following tests:

1. Pressure test using air or water at the rough-in stage in accordance with OBC Section 7.3.6.1(l).
2. Final test using smoke or air pressure after the installation of all fixtures, in accordance with OBC section 7.3.6.1(2)
3. Ball tests on all building drains and building sewers in accordance with OBC Section 7.3.6.1(5)

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 with the relevant Canadian Standards Association (CSA) as detailed under Section 7.6.2.1(1), and all fixtures 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: \_\_\_\_\_

(Print)

NAME OF PLUMBER: \_\_\_\_\_

(Print)

SIGNATURE: \_\_\_\_\_