



www.wettinc.ca
@WETT_CA

This inspection form is provided to WETT members as a recommended part of completing a WETT Inspection™. If this form is modified in any way from the official form provided by WETT, it will no longer be considered to be an official WETT Inspection™ form.

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 #: _____

- 1. Visual Inspection:** This inspection includes the following:
- Measurements of clearances.
 - Opening stove doors and all ground-accessible dampers/clean-out doors.
 - Visual inspection of the chimney from the ground.
 - 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).
 - 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:
- All visual elements of the system as indicated in **Visual** Inspection.
 - Hands-on work which may include:
 - Taking apart flue pipes,
 - Opening clean-outs,
 - Entering the attic to view additional system components,
 - Accessing the chimney on the roof.
 - 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.
 - 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:
- All visual elements of the system as indicated in **Visual** Inspection.
 - All hands-on work as indicated in **Technical** Inspection.
 - General construction work to building elements including:
 - Opening of walls or ceilings,
 - Disassembly or invasive work on masonry or prefab chimneys,
 - Examination of chimney liners,
 - 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.

(SAMPLE – FOR DISPLAY PURPOSES ONLY)

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

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

CLEARANCE TO	REQUIRED	ACTUAL	CODE COMPLIANCE	PHOTOS TAKEN
1. Combustible right side wall	_____	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
2. Combustible left side wall	_____	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
3. Combustible rear wall	_____	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
4. Combustible corner – right side (45 degrees)	_____	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
5. Combustible corner – left side (45 degrees)	_____	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
6. Top/ceiling	_____	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes

CLEARANCES/REQUIREMENTS	REQUIRED	ACTUAL	CODE COMPLIANCE	PHOTOS TAKEN
7. Shielding ceiling	_____	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
8. Wall shielding – rear	_____	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
9. Wall shielding – right side	_____	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
10. Wall shielding – left side	_____	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
11. Ember pad material	Continuous, durable, non-combustible	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
12. Ember pad – front	Minimum 18"	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
13. Ember pad – rear	Minimum 8"	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
14. Ember pad – right side	Minimum 8"	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
15. Ember pad – left side	Minimum 8"	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes

CLEARANCES/REQUIREMENTS	REQUIRED	ACTUAL	CODE COMPLIANCE	PHOTOS TAKEN
16. Radiant heat floor protection material – uncertified appliance	CSA B365-17: 8.1.4	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
17. Radiant heat floor protection material – certified appliance	_____	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
18. Hazardous location	CSA B365-17: 4.3	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
19. Outdoor combustion air	☐ Yes ☐ No	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
20. Is CO alarm present in the same room with solid-fuel-burning appliance?	9.32.4.2.3 (BCBC)	☐ Yes ☐ No	☐ Yes ☐ No ☐ N/A	☐ Yes
21. Is CO alarm present in the same room with solid-fuel-burning appliance?	9.32.3.9.3 (ABC)	☐ Yes ☐ No	☐ Yes ☐ No ☐ N/A	☐ Yes
22. Is CO alarm present?	9.33.4.2 (OBC)	☐ Yes ☐ No	☐ Yes ☐ No ☐ N/A	☐ 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			
23. Wall clearances – right side	Unshielded 18"	Shielded 9"	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
24. Wall clearances – left side	18"	9"	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
25. Wall clearances – rear wall	18"	9"	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes

FLUE PIPE/ CONNECTOR REQUIREMENTS	REQUIRED		ACTUAL		CODE COMPLIANCE		PHOTOS TAKEN
	Uncertified	Certified					
26. (a) Clearances - horizontal pipe	18"	9"	_____	_____	☐ Yes ☐ N/A	☐ No ☐ UTI	☐ Yes
26. (b) Clearances – ceiling	18"	9"	_____	_____	☐ Yes ☐ N/A	☐ No ☐ UTI	☐ Yes
27. Total length	Maximum 10'		_____	Actual(s)	☐ Yes ☐ N/A	☐ No ☐ UTI	☐ Yes
28. Elbows	Maximum 180°		_____	Actual(s)	☐ Yes ☐ N/A	☐ No ☐ UTI	☐ Yes
29. Fastening	3 screws per joint		_____		☐ Yes ☐ N/A	☐ No ☐ UTI	☐ Yes
30. Allowance for expansion	Elbow/ slip/ adjust		_____	Actual(s)	☐ Yes ☐ N/A	☐ No ☐ UTI	☐ Yes
31. Flue pipe orientation	Male end down		_____		☐ Yes ☐ N/A	☐ No ☐ UTI	☐ Yes
32. Joint overlap	Min 30 mm (1-3/16")		_____		☐ Yes ☐ N/A	☐ No ☐ UTI	☐ Yes
33. Flue pipe slope	Min ¼" per foot		_____		☐ Yes ☐ N/A	☐ No ☐ UTI	☐ Yes
34. Material – steel or other non-combustible material with a melting point of not less than 1100 °C (2000 °F)	☐ Yes ☐ No		_____		☐ Yes ☐ N/A	☐ No ☐ UTI	☐ Yes
35. Minimum thickness of flue pipe			_____		☐ Yes ☐ N/A	☐ No ☐ UTI	☐ Yes
36. Flue pipe condition	☐ Yes ☐ No		_____		☐ Yes ☐ N/A	☐ No ☐ UTI	☐ Yes
37. Pipe shielding present	☐ Yes ☐ No		_____		☐ Yes ☐ N/A	☐ No ☐ UTI	☐ Yes
38. Support: horizontal present	☐ Yes ☐ No		_____		☐ Yes ☐ N/A	☐ No ☐ UTI	☐ Yes
39. Barometric damper present CSA B365-17: 4.4.4	☐ Yes ☐ No		_____		☐ Yes ☐ N/A	☐ No ☐ UTI	☐ Yes
40. Flue-mounted heat reclaimers present CSA B365-17: 4.4.1	☐ Yes ☐ No		_____		☐ Yes ☐ N/A	☐ No ☐ UTI	☐ Yes
41. Does the flue pipe pass through floors or ceilings?	☐ Yes ☐ No		_____		☐ Yes ☐ N/A	☐ No ☐ UTI	☐ Yes
42. Connection to factory-built chimney – Mfr. instructions	☐ Yes ☐ No		_____		☐ Yes ☐ N/A	☐ No ☐ UTI	☐ Yes

COMPONENT/CLEARANCE	REQUIRED	ACTUAL	CODE COMPLIANCE	PHOTOS TAKEN
43. Minimum horizontal extension beyond inside wall surface	_____	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
44. Maximum horizontal extension beyond inside wall surface	_____	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
45. Wall radiation shield	☐ Yes ☐ No	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
46. Base tee and cap	☐ Yes ☐ No	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
47. Base tee support	☐ Yes ☐ No	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
48. Wall support/band	☐ Yes ☐ No	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
49. Distance between supports	☐ Yes ☐ No	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
50. Chimney offsets	☐ Yes ☐ No	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
51. Offset support	☐ Yes ☐ No	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
52. Firestopping	☐ Yes ☐ No	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
53. Ceiling support	☐ Flat ☐ Cathedral	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
54. Minimum vertical extension below ceiling	_____	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
55. Attic radiation shield	☐ Yes ☐ No	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes

COMPONENT/CLEARANCE	REQUIRED	ACTUAL	CODE COMPLIANCE	PHOTOS TAKEN
56. Is attic radiation shield above insulation level?	☐ Yes ☐ No	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
57. Other radiation shield(s)	☐ Yes ☐ No	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
58. Enclosed through living space	☐ Yes ☐ No	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
59. Roof flashing/storm collar	☐ Yes ☐ No	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
60. Rain cap	☐ Yes ☐ No	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
61. Rain cap spark arrestor	☐ Yes ☐ No	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
62. Roof braces	☐ Yes ☐ No	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
63. Roof brace solidly anchored	☐ Yes ☐ No	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
64. Height above roof surface	Min – 900 mm (3'/36")	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
65. Height within 3 m (10')	Min – 600 mm (2'/24")	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
66. Chimney height above chase cap	_____	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
67. Chimney clearance to combustibles	_____	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ Yes
68. Other areas of chimney enclosed or hidden	☐ Yes ☐ No	_____	☐ Yes ☐ No ☐ N/A ☐ UTI	☐ 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.

(Amount of creosote should be noted in comments section.)

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 Number of photos: _____

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.

Please attach additional page(s) if needed

Customer signature: _____ Inspector signature: _____

Inspector WETT #: _____

Date: _____ Date: _____

PHOTOS:

Section #: _____

Section #: _____

Section #: _____

Section #: _____

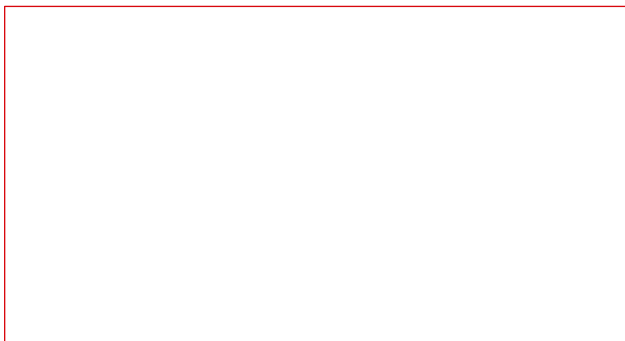
Section #: _____



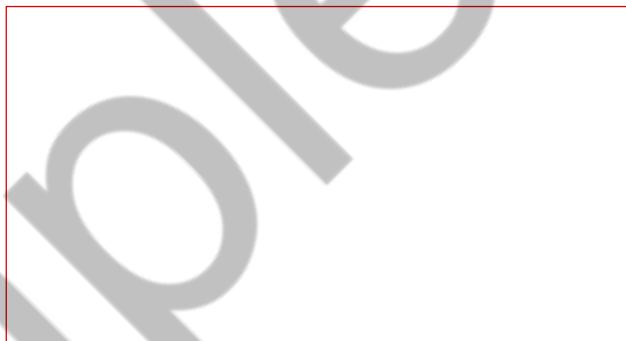
Section #: _____



Section #: _____



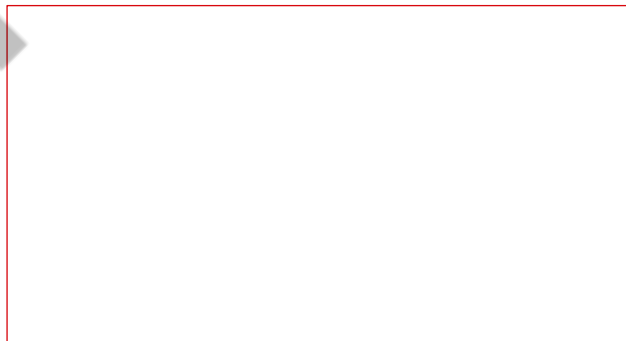
Section #: _____



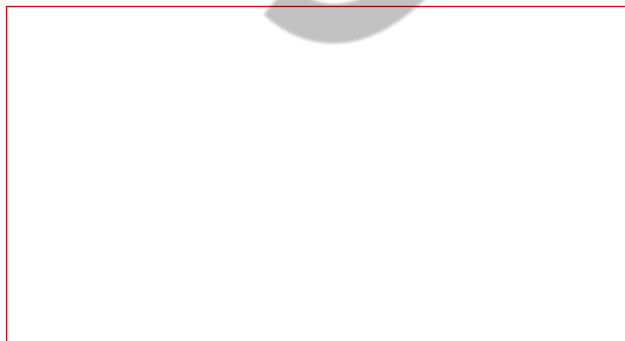
Section #: _____



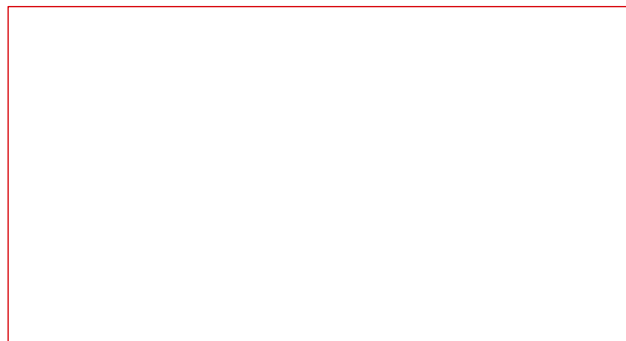
Section #: _____



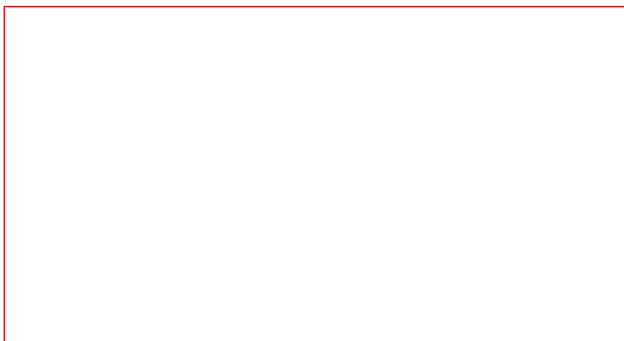
Section #: _____



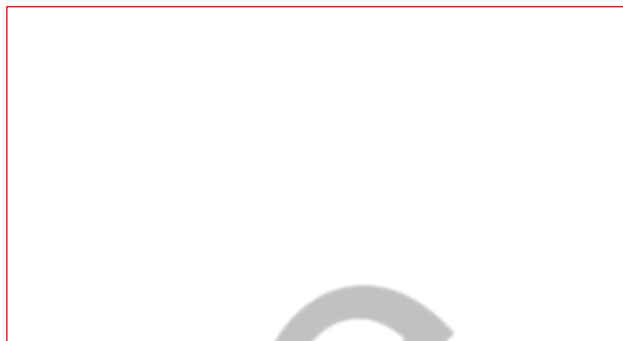
Section #: _____



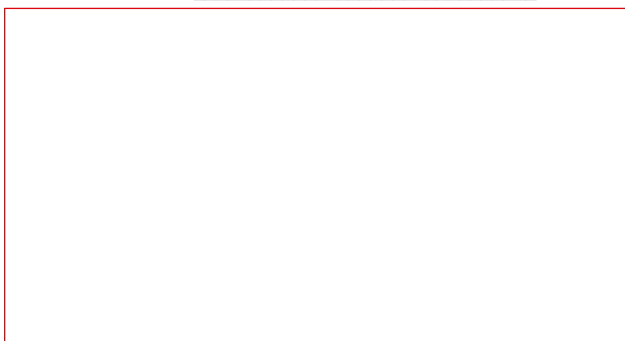
Section #: _____



Section #: _____



Section #: _____



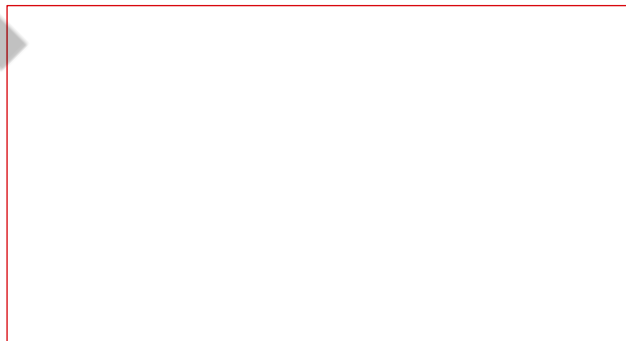
Section #: _____



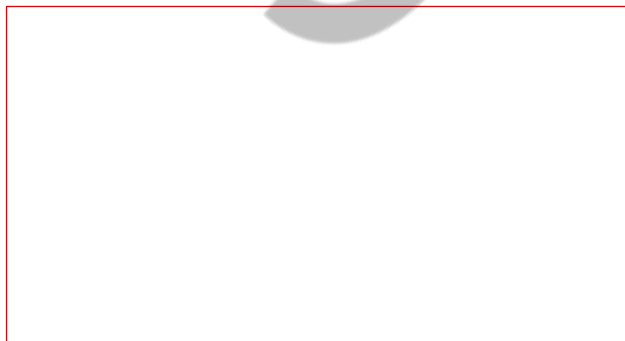
Section #: _____



Section #: _____



Section #: _____



Section #: _____

