



30 King Street East, PO Box 100
Gananoque, ON K7G 2T6
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Drainage, Venting and Potable water systems testing

Date: _____

RE: Property Address _____ Owner Name _____

This is to certify that _____ has completed the installation of the drainage, venting and potable water system at the above mentioned address:

A. DRAINAGE AND VENTING SYSTEMS

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

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

B. POTABLE WATER SYSTEMS

- a. The entire potable water system has successfully passed the pressure test using water or air on the complete system after the installation of all fixtures, in accordance with the O.B.C. section 7.3.7.2.(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 7.2.1.3.(2) of the O.B.C. and no cross connections exist that would render the potable water system non-potable as detailed under section 7.6.2.1.(1) of the O.B.C. and all fixtures meet the water efficiency requirements detailed under section 7.6.4.of the O.B.C.

The plumbing system is complete and ready for operation by the building occupants.

Plumbing Company Name: _____ Contact #: _____

Company address: _____

Name of plumber (Please print) _____

I have a "Certificate of Qualification (C of Q)" as a plumber and have attached a copy of my certificate.

Signature: _____