

**Declaration of Conformance with Ventilation Requirements
Based on the 2010 National Building Code or
CAN/CSA-F-326-M**

Each section of this form that applies MUST be completed correctly and entirely (Page 1 & Page 2). Failure to do so, will result in a rejection by *MuniCode Services Ltd.*, and will require a resubmission. A FRAMING Inspection CANNOT be scheduled until the proper information has been received.

(Part A – Contact Information)

Project Address: _____ **Municipality:** _____

Owner’s Name: _____ **Telephone:** _____

Mech Contractor: _____ **Telephone:** _____

(Part B – Read the following statements carefully)

1) Where non-heating-season ventilation is required, it shall be provided by natural ventilation or a mechanical ventilation system in accordance with Subsection 9.32.2 of the 2010 National Building Code.

2) Where heating-season mechanical ventilation is required, it shall be provided in accordance with Subsection 9.32.3. of the 2010 National Building Code or in conformance with good building practices as described in CAN/CSA-F-326-M “Residential Mechanical Ventilation Systems”.

3) All contractors installing ventilation systems must be familiar with Section 9.32 of the 2010 National Building Code or CAN/CSA-F-326-M “Residential Mechanical Ventilation Systems”. Anyone who is not familiar with either of these standards yet makes declarations as if they were, will be construed as providing false information to a Building Official, as described in The Uniform Building and Accessibility Standards Regulations – Part 2, Section 12(a). If the ventilation system is found to be incorrectly installed the Building Official may, require the contractor to carry out any and all repairs and/or alterations as necessary to ensure that the proper function of the system is achieved.

(Part C – Declarative Statements – check one of the boxes for each statement that applies

1) The ventilation system shall be designed and installed in accordance with:

(A) Section 9.32 of the 2010 National Building Code.

or if more than 5 bedrooms in accordance with,

(B) CAN/CSA-F-326-M “Residential Mechanical Ventilation Systems”

If answer is (B), provide HRAI certification number: _____

2) If heating appliances (including furnaces, water heaters and fireplaces) are other than direct vent or mechanically vented, describe how protection against depressurization and subsequent combustion spillage will be achieved:

(A) In accordance with Article 9.32.3.8 in Section 9.32 of the 2010 National Building Code.

(B) Through the test procedure described in CAN/CGSB-51.71 “The Spillage Test: Method to Determine the Potential for Pressure-Induced Spillage from Vented, Fuel-Fired, Space Heating Appliances, Water Heaters and Fireplaces”.

(If answer is B, submit to *MuniCode* a test report in conformance with the above test procedure.)

3) The ventilation system will be composed of:

(A) Separate Principal and Supplemental exhaust fans installed in accordance with Articles 9.32.3.3 to 9.32.3.7 of Section 9.32. of the 2010 National Building Code.

(B) A combination of an air to air exchanger and supplemental exhaust fans as described in Articles 9.32.3.3 to 9.32.3.7, 9.32.3.12 of Section 9.32 of the 2010 National Building Code.

(C) A principle exhaust fan (air to air exchanger) capable of exhausting the kitchen and other rooms at a rate of not less than 2.5 times the minimum normal operating exhaust capacity specified in Table 9.32.3.3. and as described in Articles 9.32.3.3 to 9.32.3.7 of Section 9.32 of the 2010 National Building Code.

(D) A mechanical ventilation system designed, constructed and installed in accordance with good practice such as described in CAN/CSA-F-326-M “Residential Mechanical Ventilation Systems”

(Part D – Declaration – state name and company)

I _____ of _____ declare that all the information I have provided to *MuniCode* Services Ltd., is accurate and true to the best of my knowledge.

Date: _____

Signature: _____