



SOLID FUEL HEATING QUESTIONNAIRE

POLICY NUMBER
3954484

REPORT DATE
30/Mar/12

PHOTO REQUIRED YES NO
PHOTO ATTACHED YES NO

INSURANCE COMPANY ECONOMICAL	INSURED B FRIEDMAN	AGENT/BROKER CARLETON	BROKER CLIENT ID# FRIB01
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1. HEATING UNIT

TYPE Pacific Energy	<input type="checkbox"/> ACORN STOVE, BOX, FRANKLIN OR POT BELLY STOVE (LOOSE FITTING OR NO DOORS)	<input type="checkbox"/> SPACE HEATER	<input type="checkbox"/> OTHER (SPECIFY)
MAKE SuperSeries	<input type="checkbox"/> COOKSTOVE	<input checked="" type="checkbox"/> WOOD STOVE, AIRTIGHT	
MODEL 15 Yrs.	<input type="checkbox"/> FIRE PLACE INSERT	<input type="checkbox"/> WOODSTOVE, NOT AIRTIGHT	
AGE	<input type="checkbox"/> FIREPLACE, ZERO CLEARANCE	<input type="checkbox"/> WOOD FURNACE	
	<input type="checkbox"/> MASONRY FIREPLACE	<input type="checkbox"/> WOOD FURNACE ADD ON	
	<input type="checkbox"/> PELLET STOVE	<input type="checkbox"/> WOOD / OIL COMBINATION	
IS THE UNIT CERTIFIED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, BY:	<input type="checkbox"/> CANADIAN STANDARDS ASSOCIATION (CSA)	<input type="checkbox"/> UNDERWRITERS' LABORATORIES OF CANADA (ULC)	
	<input type="checkbox"/> WARNOCK-HERSEY PROF. SERVICE LTD.	<input type="checkbox"/> OTHER (SPECIFY)	
ADDRESS OF PREMISES WHERE UNIT IS INSTALLED	<input type="checkbox"/> PRINCIPLE RESIDENCE	<input checked="" type="checkbox"/> OTHER (SPECIFY) Cottage	

WHERE IS THE HEATING UNIT LOCATED?

- ATTACHED GARAGE DETACHED GARAGE
 WORKSHOP
 DWELLING (SPECIFY) Living Room
 OTHER (SPECIFY) _____

IS THE HEATING UNIT PRIMARY AUXILIARY HOW OFTEN IS HEATING UNIT USED? NUMBER OF HOURS PER DAY 10 NUMBER OF DAYS PER YEAR 100

FUEL: WOOD ONLY NUMBER OF CORDS USED ANNUALLY 3 FACE CORD (16" x 4' x 8')
 WOOD AND OIL PELLET (SPECIFY TYPE) STANDARD /BUSH CORD (4' x 4' x 8')
 OTHER (SPECIFY TYPE) _____

IF FUEL IS NOT WOOD, SPECIFY AMOUNT BURNED ANNUALLY _____

ARE ASHES DISPOSED OF IN A METAL CONTAINER? YES NO IS THE CONTAINER EQUIPPED WITH A METAL LID? YES NO

IS THE ASH CONTAINER PLACED ON A NON-FLAMMABLE SURFACE? YES NO

2. CHIMNEY

TYPE	<input type="checkbox"/> MASONRY	CHIMNEY LINING: <input type="checkbox"/> FLUE TILE <input type="checkbox"/> STAINLESS STEEL <input type="checkbox"/> OTHER (SPECIFY) _____
	<input checked="" type="checkbox"/> FACTORY BUILT DOUBLE WALLED METAL CHIMNEY - NAME OF MANUFACTURER _____	
	INSTALLATION BY PROFESSIONAL? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, NAME OF FIRM _____ <input checked="" type="checkbox"/> UNKNOWN
LABELLED:		
	<input type="checkbox"/> CANADIAN STANDARDS ASSOCIATION (CSA)	<input type="checkbox"/> UNDERWRITERS' LABORATORIES OF CANADA
	<input type="checkbox"/> WARNOCK-HERSEY PROF. SERVICE LTD.	<input type="checkbox"/> OTHER (SPECIFY) _____
AGE:	<input type="checkbox"/> CONCRETE <input type="checkbox"/> OTHER TYPE OF CHIMNEY (SPECIFY) _____ <input type="checkbox"/> UNKNOWN	
DOES UNIT SHARE A CHIMNEY FLUE? <input type="checkbox"/> YES	PROVIDE DETAILS _____	
<input checked="" type="checkbox"/> NO		
CHIMNEY IS INSTALLED	<input checked="" type="checkbox"/> INSIDE BUILDING <input type="checkbox"/> OUTSIDE BUILDING <input type="checkbox"/> OUTSIDE BUILDING IN INSULATED ENCLOSURE	
HOW MANY TIMES PER YEAR IS THE CHIMNEY CLEANED? 1	DATE OF LAST CLEANING? _____ BY WHOM? _____	
CLEARANCE OF CHIMNEY TO NEAREST COMBUSTIBLES _____	<input type="checkbox"/> INCHES <input type="checkbox"/> CENTIMETRES IS CHIMNEY RATED FOR A CONTINUOUS FLUE GAS TEMPERATURE OF 650°C <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> UNKNOWN	

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3. CLEARANCES

IMPORTANT

PLEASE COMPLETE THE FOLLOWING CHART. THE ACTUAL CLEARANCE IS WHAT YOU MEASURE, WHEREAS THE REQUIRED DISTANCE IS THAT SPECIFIED IN THE OWNER'S MANUAL OR ON THE LABEL ATTACHED TO THE HEATING UNIT.
THE MEASUREMENTS ARE IN:

INCHES OR CENTIMETRES

	ACTUAL	REQUIRED
SHORTEST DISTANCE OF STOVE TO:	BACK WALL	
	SIDE WALL	
	CORNER	
	CEILING	
SHORTEST DISTANCE OF STOVE PIPE TO:	BACKWALL	
	SIDEWALL	
	CEILING	
SHORTEST DISTANCE FROM HEATING UNIT TO EDGE OF FLOOR PAD IN:	FRONT	
	LEFT SIDE	
	RIGHT	
	BACK	

IS THERE A THIMBLE WHERE THE PIPE PASSES THROUGH WALL? YES NO

TOTAL LENGTH OF ALL STOVE PIPE (INCLUDING ELBOWS) _____

NUMBER OF ELBOWS IN STOVE PIPE? _____

CONSTRUCTION OF STOVE PIPE:

- DOUBLE WALLED
- SINGLE WALLED (INCLUDING BLACK STEEL)
- GALVANIZED
- OTHER (SPECIFY) _____

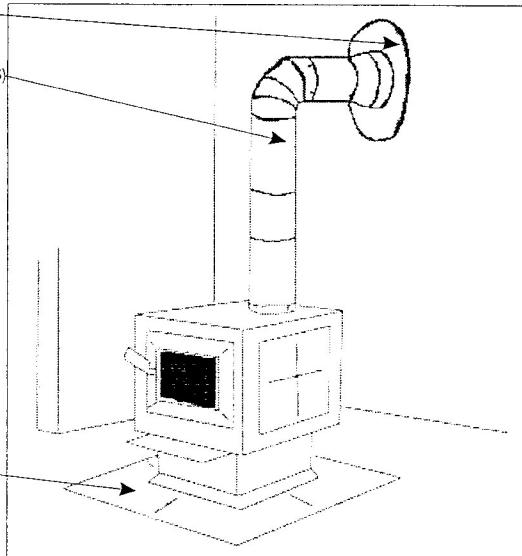
CONSTRUCTION OF:
SIDEWALL _____

BACKWALL _____

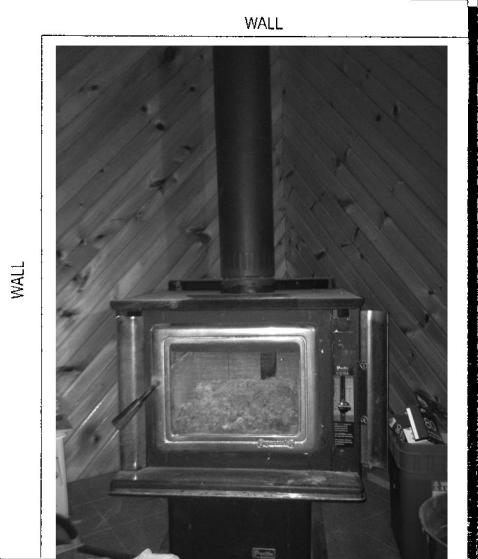
CEILING _____

IS THERE A NON-COMBUSTIBLE PAD? YES NO

SHORTEST DISTANCE OF UNIT TO FURNITURE, FUEL OR OTHER COMBUSTIBLE MATERIAL: _____



DRAW AND LABEL DIAGRAM OF HOW THE UNIT LOOKS



4. INSTALLATION

WHO INSTALLED THE HEATING UNIT? HEATING CONTRACTOR HOMEOWNER
IS THE CONTRACTOR WETT CERTIFIED? YES NO

DOES THE STOVE PIPE PASS THROUGH A CONCEALED SPACE/WALL? YES DESCRIBE _____

NO NOT APPLICABLE

TYPE OF SHIELDING: SHEET METAL PERMANENTLY INSTALLED? YES NO CERAMIC TILE BRICK CONCRETE OTHER _____

DISTANCES ARE IN: INCHES CENTIMETRES

DISTANCE FROM WALL TO SHIELD: _____ DISTANCE FROM TOP OF STOVE TO TOP OF SHIELD: _____ DISTANCE FROM HEAT SHIELD TO FLOOR: _____

ARE THE WALL SPACERS NON-COMBUSTIBLE? YES NO IS THERE AN AIR SPACE AT TOP AND BOTTOM? YES NO IS THE SHIELD ONE INCH FROM THE WALL? YES NO

5. OTHER

HAS THE INSTALLATION, INCLUDING CHIMNEY, BEEN INSPECTED BY YES NO (EXPLAIN) _____
SOMEONE WHO IS WETT CERTIFIED?

HAVE ANY MODIFICATIONS BEEN MADE TO THE HEATING UNIT OR YES NO (EXPLAIN) _____
CHIMNEY SINCE INSTALLED OR INSPECTED?

6. REMARKS

COMPLETED BY: _____

DATE: _____