

RESIDENTIAL MECHANICAL VENTILATION DESIGN SUMMARY		for design and performance of residential ventilation systems to NBC 05 - 9.32	
A COMBUSTION APPLIANCES	<input type="checkbox"/> forced air circulation	ABCDEFJK	Exhaust device: _____ Location _____
	<input type="checkbox"/> no forced air circulation	<input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> J <input type="checkbox"/> K	Device airflow: _____ cfm
	<input type="checkbox"/> no combustion appliances	ABCDEFJK	Make-up fan man/model _____
	<input type="checkbox"/> any non direct/mech vent heating or DHW	ABCDEFJK	Location _____ Design airflow: _____ cfm
	<input type="checkbox"/> any non direct vent fireplace	ABCDEFJK	Exhaust device: _____ Location _____
	<input type="checkbox"/> any solid fuel	ABCDEFJK	Device airflow: _____ cfm
	<input type="checkbox"/> soil gas is a problem & no mitigation sys	ABCDEFJK	Make-up fan man/model _____
B SYSTEM DESIGN OPTIONS	<input type="checkbox"/> A ventilation coupled with forced air ventilation supply air and supplemental fans		Location _____ Design airflow: _____ cfm
	<input type="checkbox"/> B ventilation coupled with forced air, heat recovery ventilation supply air and supplemental fans		Exhaust device: _____ Location _____
	<input type="checkbox"/> C ventilation not coupled with forced air, with ventilation supply air and supplemental fans		Device airflow: _____ cfm
	<input type="checkbox"/> D ventilation not coupled with forced air, heat recovery ventilation supply air and supplemental fans		Make-up fan man/model _____
	<input type="checkbox"/> E dual capacity ventilation coupled with forced air ventilation supply air and no supplemental fans		Location _____ Design airflow: _____ cfm
	<input type="checkbox"/> F ventilation coupled with forced air, dual capacity heat recovery, ventilation supply air and no supplemental fans		Exhaust device: _____ Location _____
	<input type="checkbox"/> J exhaust only ventilation no ventilation supply air with or without forced air circulation and supplemental fans		Device airflow: _____ cfm
	<input type="checkbox"/> K ventilation system complying with CSA F-326		Make-up fan man/model _____
G PRINCIPAL VENTILATION FAN	Number of bedrooms _____ airflow = _____ to _____ cfm (one =32-48, two =36-56, three =44-64, four =52-76, five=60-90)		Location _____ Design airflow: _____ cfm
	Location: _____ sones		Roll #: _____ permit #: _____ lot & plan: _____
D VENTILATION SUPPLY AIR	<input type="checkbox"/> required <input type="checkbox"/> not required		Township: _____ civic address: _____
	Location: _____ sones		Name: _____ R2000 ID # _____
	Manufacturer / Model: _____ <input type="checkbox"/> HVI		Address: _____ city: _____
M KITCHEN SUPPLEMENTAL	<input type="checkbox"/> required <input type="checkbox"/> not required		Postal code: _____ ph: _____ fax: _____
	Location: _____ sones		Name: _____ HRAI # _____
	Manufacturer / Model: _____ <input type="checkbox"/> HVI		Address: _____ city: _____
I KITCHEN MAKE-UP AIR	<input type="checkbox"/> required <input type="checkbox"/> not required		Postal code: _____ ph: _____ fax: _____
	Location: _____ sones		I certify this ventilation system design to be in accordance with:
	Manufacturer / Model: _____ <input type="checkbox"/> HVI		<input type="checkbox"/> NBC 05 9.32 <input type="checkbox"/> CSA F326-M 91 <input type="checkbox"/> R-2000
G BATH SUPPLEMENTAL	<input type="checkbox"/> required <input type="checkbox"/> not required		Signature: _____ Date: _____
	Location: _____ sones		MEASURED AIRFLOWS
	Manufacturer / Model: _____ <input type="checkbox"/> HVI		
H BATH MAKE-UP	<input type="checkbox"/> required <input type="checkbox"/> not required		Name: _____ HRAI # _____
	Location: _____ sones		Address: _____ city: _____
	Manufacturer / Model: _____ <input type="checkbox"/> HVI		Postal code: _____ ph: _____ fax: _____
I certify this ventilation system installed to be in accordance with:			INSTALLER COMMISSIONER
<input type="checkbox"/> NBC 05 9.32 <input type="checkbox"/> CSA F326-M 91 <input type="checkbox"/> R-2000			
Signature: _____ Date: _____			