



City of Revelstoke

P.O. Box 170, Revelstoke, British Columbia V0E 2S0
revelstoke.ca

Certification of Plumbing Test.

For use by certified plumbers who have a copy of their British Columbia Tradesman Qualification Certification

INFORMATION

Name: _____ BC Tradesman, Certification # _____

Company Name: _____

PROPERTY INFORMATION

Building Permit No: _____ Roll # _____

Legal Description: _____

Civic Address: _____

Owner's Name: _____

Building Official to be notified prior to testing	Date	Initials	Witness
Sanitary Sewer System			
Drainage and Venting System (Including Internal Roof Drains)			
Potable Water System			
Underground Drainage and Venting System			
Testing of the Potable Water Systems as required under Section 7.3.7 Testing of Potable Water Systems (Max in-service water pressure of Min. 100 PSI Air for 2 hrs)			
Testing of DWV sewer system as required under Section 7.3.6. Testing of Drainage or Venting Systems (Static pressure test, or air tested at 35 KPA (5 PSI) for 15 minutes.)			
Miscellaneous Partial			

I hereby certify that the installation and test of the plumbing system at the address as indicated above is installed and tested in accordance with Part 7 of the current B.C. Building Code "Plumbing Services". Completion of this form in no way waives responsibility to request inspection by the City of Revelstoke.

Owner/Agent Name (print)

Owner/Agent Signature

Date

Plumber Name (print)

Plumber Signature

Date