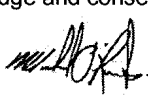


Schedule 1: Designer Information

Type in the text you want to insert

Use one form for each individual who reviews and takes responsibility for design activities with respect to the project.

A. Project Information			
Building number, street name MODEL CERTIFICATION		Unit no. N/A	Lot/con. N/A
Municipality KING CITY	Postal code N/A	Plan number/ other description N/A	
B. Individual who reviews and takes responsibility for design activities			
Name MICHAEL O'ROURKE		Firm HVAC DESIGNS LTD.	
Street address 65 CHURCH STREET SOUTH		Unit no.	Lot/con.
Municipality AJAX	Postal code L1S 6A7	Province ONTARIO	E-mail info@hvacdesigns.ca
Telephone number (905) 619-2300	Fax number (905) 619-2375	Cell number ()	
C. Design activities undertaken by individual identified in Section B. [Building Code Table 3.5.2.1. of Division C]			
<input type="checkbox"/> House <input type="checkbox"/> Small Buildings <input type="checkbox"/> Large Buildings <input type="checkbox"/> Complex Buildings <input type="checkbox"/> HVAC – House <input type="checkbox"/> Building Services <input type="checkbox"/> Detection, Lighting and Power <input type="checkbox"/> Fire Protection <input type="checkbox"/> Building Structural <input type="checkbox"/> Plumbing – House <input type="checkbox"/> Plumbing – All Buildings <input type="checkbox"/> On-site Sewage Systems			
Description of designer's work Heat Loss/Gain Calculations Duct Sizing Residential Mechanical Ventilation Design Summary Residential System Design per Can/CSA-F280-M90		Model: OPT 5 BED - 50-10 Project: CASTLES OF KING CITY	
D. Declaration of Designer			
I, <u>MICHAEL O'ROURKE</u> declare that (choose one as appropriate): (print name)			
<input type="checkbox"/> review and take responsibility for the design work on behalf of a firm registered under subsection 3.2.4. of Division C, of the Building Code. I am qualified, and the firm is registered, in the appropriate classes/categories. Individual BCIN: _____ Firm BCIN: _____			
<input checked="" type="checkbox"/> I review and take responsibility for the design and am qualified in the appropriate category as an "other designer" under subsection 3.2.5. of Division C, of the Building Code. Individual BCIN: <u>19669</u> Basis for exemption from registration: <u>O.B.C. SENTENCE 3.2.4.1. (4)</u>			
<input type="checkbox"/> The design work is exempt from the registration and qualification requirements of the Building Code. Basis for exemption from registration and qualification: _____			
I certify that:			
1. The information contained in this schedule is true to the best of my knowledge. 2. I have submitted this application with the knowledge and consent of the firm.			
<u>JANUARY 30, 2014</u> Date		 Signature of Designer	

NOTE:

- For the purposes of this form, "individual" means the "person" referred to in Clause 3.2.4.7(1) d) of Division C, Article 3.2.5.1. of Division C, and all other persons who are exempt from qualification under Subsections 3.2.4. and 3.2.5. of Division C.
- Schedule 1 is not required to be completed by a holder of a license, temporary license, or a certificate of authorization, issued by the Ontario Association of Architects. Schedule 1 is also not required to be completed by a holder of a license to practise, a limited license to practise, or a certificate of authorization, issued by the Association of Professional Engineers of Ontario.

ROOM USE	IMBR	ENS	WIC	BED-2	BED-3	BED-4	ENS-3	ENS-4	BED-5	ENS-2	WIC-3	ENS-5
EXP. WALL	46	12	10	32	53	18	200	140	320	18	16	18
RM AREA	384	192	258	328	210	442	110	144	280	128	0	0
CLG. HT.	11	0	0	0	12	10	10	10	10	11	9	9
COLD FLOOR	0	0	0	0	210	0	0	0	0	0	0	0
COLD CEILING	384	192	258	328	210	442	110	144	280	128	0	0
NO ATTIC EXPOSED CLG	0	0	0	0	0	0	0	0	0	0	0	0
GROSS WALL BAS ABOVE GRADE	0	0	0	0	0	0	0	0	0	0	0	0
GROSS WALL BAS BELOW GRADE	0	0	0	0	0	0	0	0	0	0	0	0
FACTORS												
GRS WALL AREA	506	120	100	352	636	180	200	140	320	198	144	162
GLAZING	20	0	0	0	0	18	8	156	0	0	9	0
NORTH	19.50	13.96	0	0	0	0	156	112	0	0	176	126
EASTWEST	19.50	33.00	0	0	24	0	0	0	46	23	0	0
SOUTH	19.50	20.92	0	0	0	0	12	234	0	0	0	6
SKYLIT.	19.50	136.72	0	0	0	0	0	0	0	0	0	0
DOORS	25.91	5.32	0	0	0	0	0	0	0	0	0	0
NET EXPOSED WALL	434	1269	260	88	257	162	180	386	274	175	135	156
EXPOSED CLG	0	0	0	0	0	0	0	0	0	0	0	0
NO ATTIC EXPOSED CLG	0	0	0	0	0	0	0	0	0	0	0	0
EXPOSED FLOOR	0	0	0	0	0	0	0	0	0	0	0	0
EXPOSED WALL BAS ABOVE GRADE	0	0	0	0	0	0	0	0	0	0	0	0
BELOW GRADE HT LOSS FLOOR	0	0	0	0	0	0	0	0	0	0	0	0
SUBTOTAL HT LOSS	3243	1166	675	1914	3231	1481	1080	756	2114	1150	570	573
SUB TOTAL HT GAIN	2533	861	247	688	1128	517	377	264	738	402	199	200
HT LOSS AIR LEAKAGE FACTOR	1132	407	236	35	176	96	79	42	271	137	30	31
HT GAIN AIR LEAKAGE FACTOR	364	124	240	1	240	1	240	2	480	240	0	240
HT GAIN PEOPLE/APPLIANCES	2	2	1	1	1	1	1	1	1	1	1	1
TOTAL HT LOSS BTU/H	4376	1574	911	2582	4360	1998	1457	1020	2852	1552	769	773
TOTAL HT GAIN x 1.3 BTU/H	4390	1904	2135	2715	2715	1305	1130	1063	2802	1734	307	638

I REVIEW AND TAKE RESPONSIBILITY FOR THE DESIGN WORK AND AM QUALIFIED IN THE APPROPRIATE CATEGORY AS AN "OTHER DESIGNER" UNDER DIVISION C, 3.2.5 OF THE BUILDING CODE.

INDIVIDUAL BCIN: 19669 MICHAEL O'Rourke

ROOM USE	DEN	DIN	KT/FRM	FAM	LAUN	WIR	FOY	INSTE	R3	R4	WOB BAS	BAS
EXP. WALL	18	24	102	0	25	5	22	59	0	0	0	232
RM AREA	0	0	0	0	0	0	0	0	0	0	0	0
CLG. HT.	10	10	11	10	11	10	10	11	9	9	9	9
COLD FLOOR	0	0	0	0	0	0	0	0	0	0	0	0
COLD CEILING	0	0	0	0	0	0	0	252	0	0	0	0
NO ATTIC EXPOSED CLG	0	0	10	0	0	0	0	0	0	0	0	0
GROSS WALL BAS ABOVE GRADE	0	0	0	0	0	0	0	0	0	0	0	686
GROSS WALL BAS BELOW GRADE	0	0	0	0	0	0	0	0	0	0	0	1392
FACTORS												
GRS WALL AREA	180	240	1122	0	275	50	220	649	0	0	0	0
GLAZING	18	0	0	0	8	6	0	38	0	0	0	15
NORTH	19.50	13.96	0	0	156	117	0	741	530	0	0	293
EASTWEST	19.50	33.00	126	0	0	0	20	468	792	0	0	209
SOUTH	19.50	20.92	0	0	9	0	0	0	0	0	0	10
SKYLIT.	19.50	136.72	0	0	20	0	0	0	0	0	0	5
DOORS	25.91	5.32	0	0	0	0	0	0	0	0	0	98
NET EXPOSED WALL	162	597	976	0	238	44	180	587	352	0	0	20
EXPOSED WALL BAS ABOVE GRADE	97	204	2854	0	0	129	526	1717	0	0	0	518
EXPOSED CLG	0	0	0	0	0	0	0	0	0	0	0	0
NO ATTIC EXPOSED CLG	0	0	10	0	0	0	0	0	0	0	0	0
EXPOSED FLOOR	0	0	0	0	0	0	0	252	182	0	0	229
EXPOSED WALL BAS ABOVE GRADE	0	0	0	0	0	0	0	0	0	0	0	5038
BELOW GRADE HT LOSS FLOOR	0	0	0	0	0	0	0	0	0	0	0	2564
SUBTOTAL HT LOSS	825	1299	5854	0	1546	246	1435	3300	0	0	0	11300
SUB TOTAL HT GAIN	348	876	4862	0	540	86	501	1152	1857	0	0	1073
HT LOSS AIR LEAKAGE FACTOR	288	453	2044	0	540	79	126	267	0	0	0	3945
HT GAIN AIR LEAKAGE FACTOR	50	126	698	0	0	1440	480	480	0	0	0	154
HT GAIN PEOPLE/APPLIANCES	2	2	4	0	6	1	2	2	0	0	0	1
TOTAL HT LOSS BTU/H	1113	1752	7898	0	2086	331	1936	4452	0	0	0	15245
TOTAL HT GAIN x 1.3 BTU/H	1142	1926	8476	0	0	476	1924	3385	0	0	0	1907

TOTAL HEAT GAIN BTU/H 47726

TONS 3.98

LOSS DUE TO VENTILATION LOAD BTU/H

18752

TOTAL STRUCTURE HEAT LOSS BTU/H 59035

TOTAL COMBINED HEAT LOSS BTU/H 77787

I REVIEW AND TAKE RESPONSIBILITY FOR THE DESIGN WORK AND AM QUALIFIED IN THE APPROPRIATE CATEGORY AS AN "OTHER DESIGNER"

UNDER DIVISION C, 3.2.5 OF THE BUILDING CODE.

INDIVIDUAL BCIN: 19669

Michael O'Rourke MICHAEL O'ROURKE

TYPE: 50-10 OPT 5 BED

LO # 53769

PAGE 3 of 3

SITE NAME: CASTLES OF KING

RESIDENTIAL MECHANICAL VENTILATION DESIGN SUMMARY**COMBUSTION APPLIANCES**

9.32.3.1(1)

- a) ☒ Direct vent (sealed combustion) only
- b) ☐ Positive venting induced draft (except fireplaces)
- c) ☐ Natural draft, B-vent or induced draft gas fireplace
- d) ☐ Solid Fuel (including fireplaces)
- e) ☐ No Combustion Appliances

HEATING SYSTEM

- ☒ Forced Air ☐ Non Forced Air
- ☐ Electric Space Heat

HOUSE TYPE

9.32.1(2)

- ☒ I Type a) or b) appliance only, no solid fuel
- ☐ II Type I except with solid fuel (including fireplaces)
- ☐ III Any Type c) appliance
- ☐ IV Type I, or II with electric space heat
- ☐ Other: Type I, II or IV no forced air

SYSTEM DESIGN OPTIONS

O.N.H.W.P.

- ☐ 1 Exhaust only/Forced Air System
- ☐ 2 HRV with Ducting/Forced Air System
- ☒ 3 HRV Simplified/connected to forced air system
- ☐ 4 HRV with Ducting/non forced air system
- ☐ Part 6 Design

TOTAL VENTILATION CAPACITY

9.32.3.3(1)

Basement & Master Bedroom	2	@ 21.2 cfm	42.4	cfm
Other Bedrooms	3	@ 10.6 cfm	31.8	cfm
Kitchen & Bathrooms	7	@ 10.6 cfm	74.2	cfm
Other Rooms	7	@ 10.6 cfm	74.2	cfm
Table 9.32.3.A.	TOTAL		222.6	cfm

PRINCIPAL VENTILATION CAPACITY REQUIRED

9.32.3.4.(1)

Master Bedroom	31.8 cfm
Two Bedrooms	47.7 cfm
Three Bedrooms	63.6 cfm
Four Bedrooms	79.5 cfm
Table 9.32.3.B.	TOTAL 79.5 cfm
More than 5 - Part 6	

SUPPLEMENTAL VENTILATION CAPACITY

9.32.3.5.

Total Ventilation Capacity	222.6	cfm
Less Principal Ventil. Capacity	120	cfm
Required Supplemental Capacity	102.6	cfm

PRINCIPAL EXHAUST FAN CAPACITY

Model: VANE 90H-V ECM Location: BSMT

120 cfm	<input checked="" type="checkbox"/> HVI Approved
0.6	sones

SUPPLEMENTAL FANS

NUTONE

Location	Model	cfm	HVI	Sones
ENS	QTXEN050C	50	<input checked="" type="checkbox"/>	0.3
W/R	QTXEN050C	50	<input checked="" type="checkbox"/>	0.3
ENS-2	QTXEN050C	50	<input checked="" type="checkbox"/>	0.3
ENS-3	QTXEN050C	50	<input checked="" type="checkbox"/>	0.3

HEAT RECOVERY VENTILATOR

9.32.3.11.

Model: VANE 90H-V ECM

159 cfm high 65 cfm low

75	% Sensible Efficiency	<input checked="" type="checkbox"/> HVI Approved
@ 32 deg F (0 deg C)		

LOCATION OF INSTALLATION

Lot: Concession

Township: Plan:

Address:

Roll # Building Permit #

BUILDER

Name:

Address:

City:

Telephone #:

Fax #:

INSTALLING CONTRACTOR

Name:

Address:

City:

Telephone #:

Fax #:

DESIGNER CERTIFICATIONI hereby certify that this ventilation system has been designed
in accordance with the Ontario Building Code.

Name: HVAC Designs Ltd.

Signature:

Michael O'Rourke

HRAI #

001820

Date:

January-14

MODEL: 50-10 OPT 5 BED
SFQT: 4969

LO# 53769

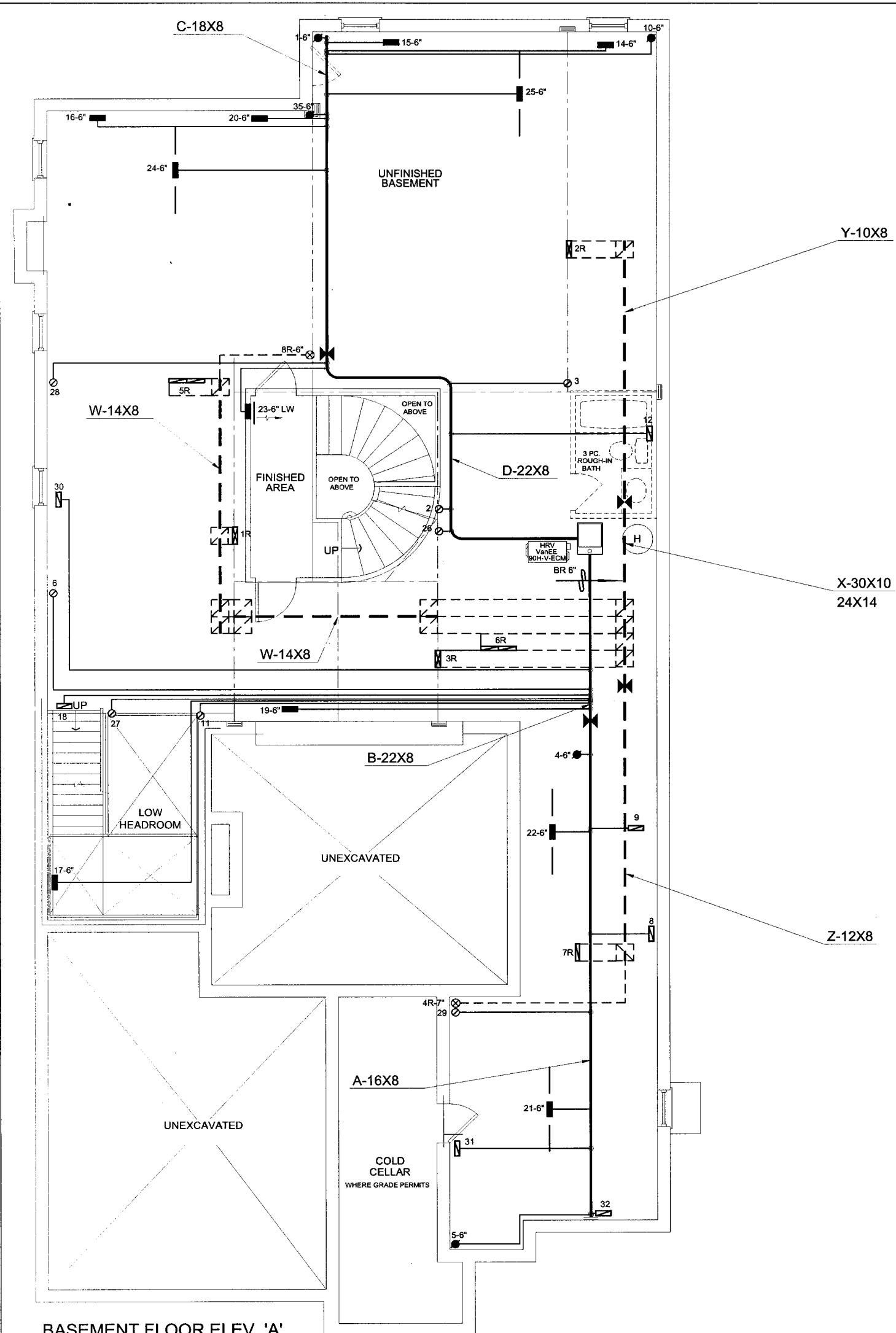
BUILDER: ZANCOR HOMES

ENERGYSTAR 12.1

Component	Compliance Package
	ZONE 1
Ceiling with Attic Space Minimum RSI (R)-Value	50
Ceiling Without Attic Space Minimum RSI (R)-Value	31
Exposed Floor Minimum RSI (R)-Value	31
Walls Above Grade Minimum RSI (R)-Value	24
Basement Walls Minimum RSI (R)-Value	20
Below Grade Slab Entire surface > 600 mm below grade Minimum RSI (R)-Value	-
Edge of Below Grade Slab ≤ 600 mm Below Grade Minimum RSI (R)-Value	10
Heated Slab or Slab ≤ 600 mm below grade Minimum RSI (R)-Value	10
Windows and Sliding Glass Doors Maximum U-Value	ZONE C
Skylights Maximum U-Value	2.8
Space Heating Equipment Minimum AFUE	95%
HRV Minimum Efficiency	75%
Domestic Hot Water Heater Minimum EF	0.9



INDIVIDUAL BCIN: 19669
MICHAEL O'ROURKE



BASEMENT FLOOR ELEV. 'A'
FLOOR AREA: 128 S.F.

I MICHAEL O'ROURKE HAVE REVIEWED AND TAKE RESPONSIBILITY FOR THE DESIGN WORK AND AM QUALIFIED UNDER DIVISION C, 3.2.5 OF THE BUILDING CODE.
Michael O'Rourke
Michael O'Rourke, BCIN# 19669
HVAC DESIGNS LTD.

OBC 2012-Rev. 2014

ENERGY STAR

HVAC LEGEND								3.		
SYMBOL	DESCRIPTION	SYMBOL	DESCRIPTION	SYMBOL	DESCRIPTION	SYMBOL	DESCRIPTION	2.		
	FLOOR SUPPLY AIR GRILLE		6" SUPPLY AIR BOOT ABOVE		14"x8" RETURN AIR GRILLE		RETURN AIR STACK ABOVE	1.		
	FLOOR SUPPLY AIR GRILLE 6" BOOT		SUPPLY AIR STACK FROM 2nd FLOOR		30"x8" RETURN AIR GRILLE		RETURN AIR STACK 2nd FLOOR	No.	Description	Date
	SUPPLY AIR BOOT ABOVE		6" SUPPLY AIR STACK 2nd FLOOR		FRA- FLOOR RETURN AIR GRILLE		REDUCER	REVISIONS		

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Client

ZANCOR HOMES

Project Name

THE CASTLES OF KING CITY
KING CITY, ONTARIO

OPT 5 BED
50-10

4969 sqft

65 Church Street South - Ajax, Ontario
L1S 6A7 Tel. 905.619.2300 - 905.420.5300 Fax 905.619.2375
Email: info@hvacdsgns.ca
Web: www.hvacdesigns.ca
Specializing in Residential Mechanical Design Services
Installation to comply with the latest Ontario Building Code. All supply branch outlets shall be equipped with a manual balancing damper.
Ductwork which passes through the garage or unheated spaces shall be adequately insulated and be gas-proofed.

HEAT LOSS 77787 BTU/H
UNIT DATA

MAKE

LENNOX

MODEL

ML195UH090XP48C-90

INPUT

88

MBTU/H

OUTPUT

85

MBTU/H

COOLING

4.0

TONS

FAN SPEED

1460

cfm @ 0.5" w.c.

OF RUNS S/A R/A FANS

3RD FLOOR

2ND FLOOR

12

4

5

1ST FLOOR

13

3

3

BASEMENT

5

1

0

ALL S/A DIFFUSERS 4"x10" UNLESS NOTED OTHERWISE ON LAYOUT. ALL S/A RUNS 5"Ø UNLESS NOTED OTHERWISE ON LAYOUT. UNDERCUT DOORS 1" min. FOR R/A

Sheet Title

BASEMENT HEATING LAYOUT

Date

JAN/2014

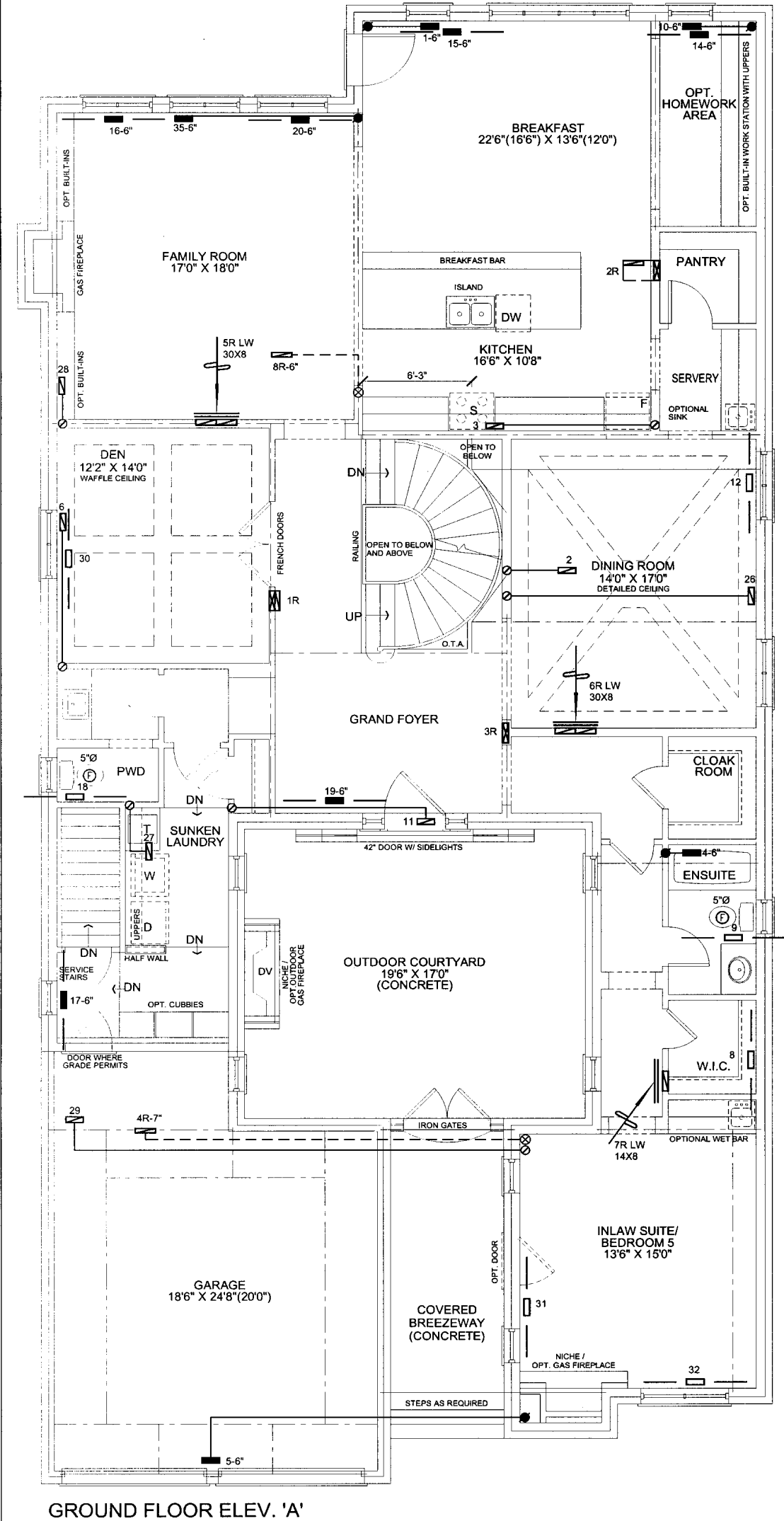
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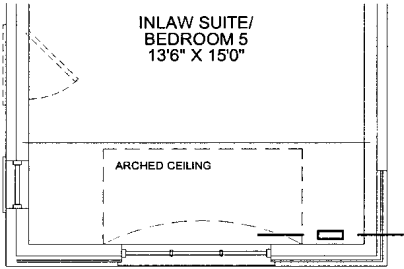
BCIN# 19669

LO#

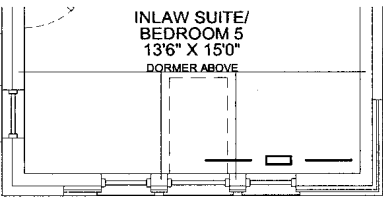
53769



GROUND FLOOR ELEV. 'A'



PARTIAL GROUND FLOOR ELEV. 'B'



PARTIAL GROUND FLOOR ELEV. 'C'

I MICHAEL O'ROURKE HAVE REVIEWED AND TAKE RESPONSIBILITY FOR THE DESIGN WORK AND AM QUALIFIED UNDER DIVISION C.3.2.5 OF THE BUILDING CODE.

Michael O'Rourke
Michael O'Rourke, BCIN# 19669
HVAC DESIGNS LTD.

OBC 2012-Rev. 2014



ENERGY STAR

HVAC LEGEND								3.		
SYMBOL	DESCRIPTION	SYMBOL	DESCRIPTION	SYMBOL	DESCRIPTION	SYMBOL	DESCRIPTION	2.		
	FLOOR SUPPLY AIR GRILLE		6" SUPPLY AIR BOOT ABOVE		14"x8" RETURN AIR GRILLE		RETURN AIR STACK ABOVE	1.		
	FLOOR SUPPLY AIR GRILLE 6" BOOT		SUPPLY AIR STACK FROM 2nd FLOOR		30"x8" RETURN AIR GRILLE		RETURN AIR STACK 2nd FLOOR	No.	Description	Date
	SUPPLY AIR BOOT ABOVE		6" SUPPLY AIR STACK 2nd FLOOR		FRA- FLOOR RETURN AIR GRILLE		REDUCER	REVISIONS		

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Client
ZANCOR HOMES

Project Name
**THE CASTLES OF KING CITY
KING CITY, ONTARIO**

**OPT 5 BED
50-10**

4969 sqft

HVACDESIGNS LTD.

65 Church Street South - Ajax, Ontario
L1S 6A7 Tel. 905.619.2300 - 905.420.5300 Fax 905.619.2375
Email: info@hvacdesigns.ca
Web: www.hvacdesigns.ca

Specializing in Residential Mechanical Design Services

Installation to comply with the latest Ontario Building Code. All supply branch outlets shall be equipped with a manual balancing damper. Ductwork which passes through the garage or unheated spaces shall be adequately insulated and be gas-proofed.

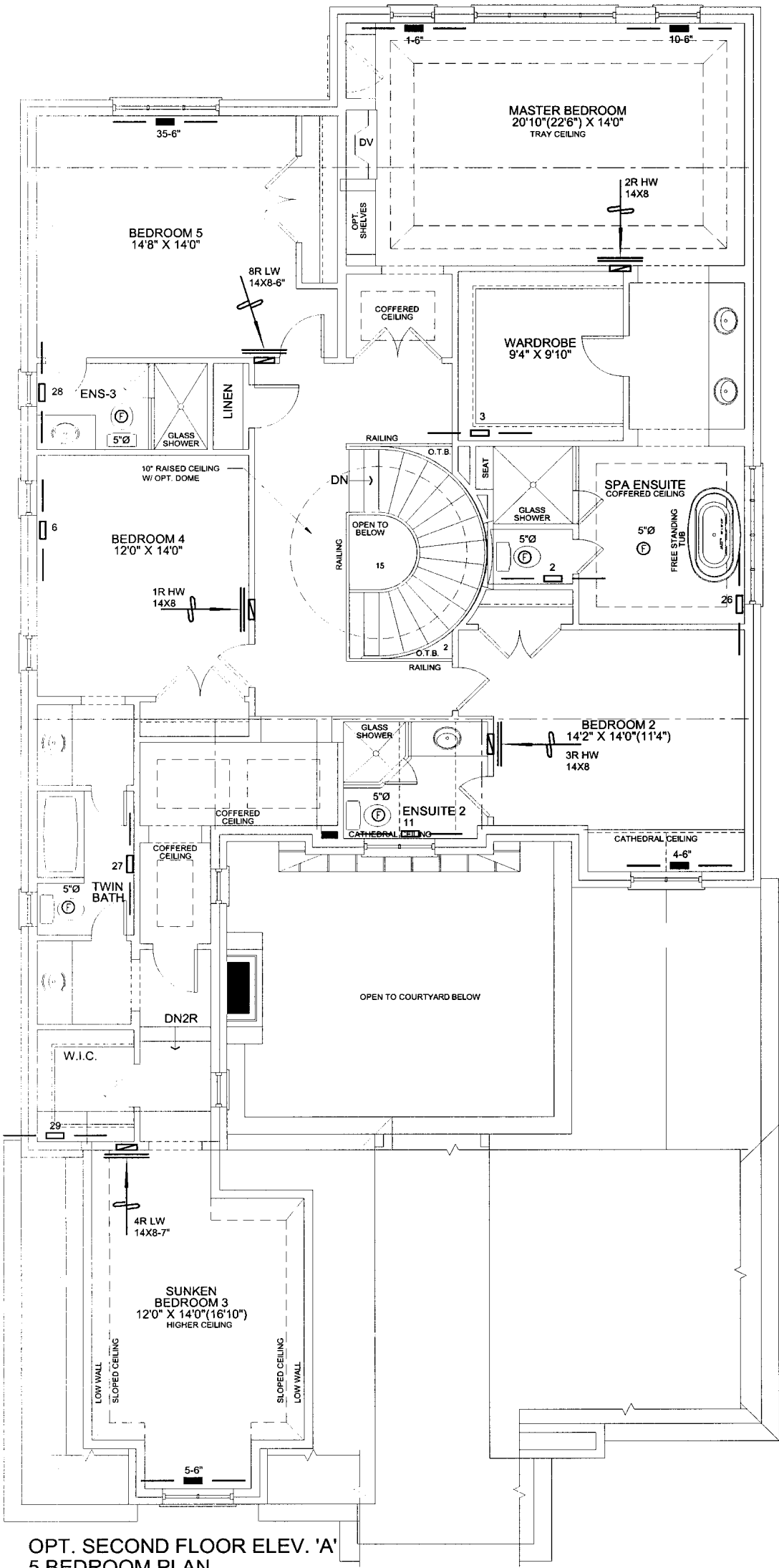
Sheet Title
**FIRST FLOOR
HEATING
LAYOUT**

Date
JAN/2014

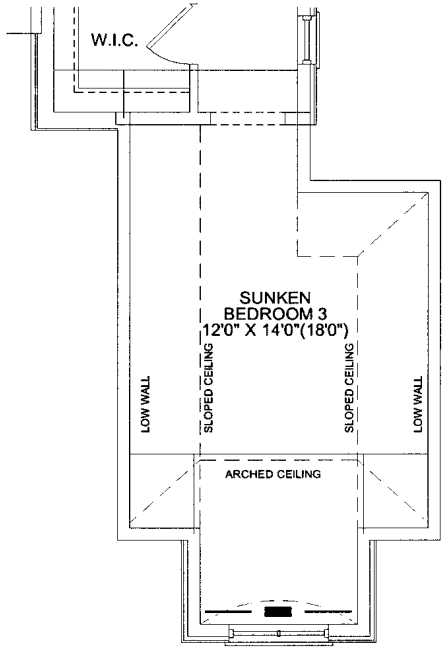
Scale
1/8" = 1'-0"

BCIN# 19669

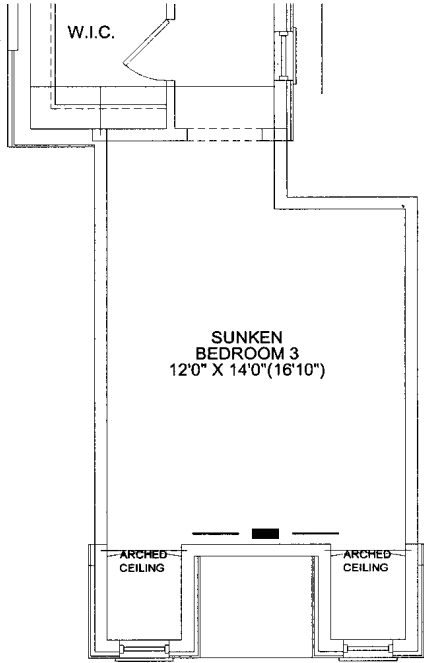
LO# **53769**



OPT. SECOND FLOOR ELEV. 'A'
5 BEDROOM PLAN



PARTIAL OPT. SECOND FLOOR ELEV. 'B'
5 BEDROOM PLAN



PARTIAL SECOND FLOOR ELEV. 'C'
5 BEDROOM PLAN

I MICHAEL O'ROURKE HAVE REVIEWED AND TAKE RESPONSIBILITY FOR THE DESIGN WORK AND AM QUALIFIED UNDER DIVISION C.3.2.5 OF THE BUILDING CODE.

Michael O'Rourke
Michael O'Rourke, BCIN# 19669
HVAC DESIGNS LTD.

OBC 2012-Rev. 2014



HVAC LEGEND								3.		
SYMBOL	DESCRIPTION	SYMBOL	DESCRIPTION	SYMBOL	DESCRIPTION	SYMBOL	DESCRIPTION	2.		
	FLOOR SUPPLY AIR GRILLE		6" SUPPLY AIR BOOT ABOVE		14"x8" RETURN AIR GRILLE		RETURN AIR STACK ABOVE	1.		
	FLOOR SUPPLY AIR GRILLE 6" BOOT		SUPPLY AIR STACK FROM 2nd FLOOR		30"x8" RETURN AIR GRILLE		RETURN AIR STACK 2nd FLOOR	No.	Description	Date
	SUPPLY AIR BOOT ABOVE		6" SUPPLY AIR STACK 2nd FLOOR		FRA- FLOOR RETURN AIR GRILLE		REDUCER	REVISIONS		

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Client ZANCOR HOMES		<div>HVACDESIGNS LTD. 65 Church Street South - Ajax, Ontario L1S 6A7 Tel. 905.619.2300 - 905.420.5300 Fax 905.619.2375 Email: info@hvacdesigns.ca Web: www.hvacdesigns.ca Specializing in Residential Mechanical Design Services Installation to comply with the latest Ontario Building Code. All supply branch outlets shall be equipped with a manual balancing damper. Ductwork which passes through the garage or unheated spaces shall be adequately insulated and be gas-proofed.</div>	Sheet Title HEATING LAYOUT	
Project Name THE CASTLES OF KING CITY KING CITY, ONTARIO			Date JAN/2014	
OPT 5 BED 50-10			Scale 1/8" = 1'-0"	
4969 sqft			BCIN# 19669	
			LO#	53769