

TROYAUSTEN

REAL ESTATE TEAM

RE/MAX Professionals North Brokerage
Independently Owned & Operated



\$1,075,000

Welcome to 2375 Watts Road

on Little Kennisis Lake, Haliburton



Amanda Tancredi

Sales Representative



CONTACT DETAILS:

 705-457-9994  amanda@troyausten.ca
 647-620-7662  troyausten.ca



Welcome to this charming 4 bedroom, 1 bathroom waterfront cottage on highly desirable Little Kennisis Lake chain. Set on a rare, level lot with coveted southern exposure, the property enjoys all-day sunshine and an ideal setting for both relaxation and family fun.

The sandy beach is perfect for children, while mature trees provide nice privacy. With the added convenience of year-round access via a municipal road, this location offers the best of cottage living. An oversized 24' x 36' garage provides excellent storage and the potential to create an additional 1-bedroom, 1-bathroom suite.

Meticulously maintained and thoughtfully upgraded, recent improvements include a newer 5-bedroom septic system, new roof, fresh exterior paint, and a newly built garage.

This is a rare opportunity to own an exceptional piece of waterfront paradise.

Property Client Full

2375 Watts Road, Dysart, Ontario K0M 1S0

Listing

2375 Watts Rd Dysart

Active / Residential Freehold / Detached

MLS®#: X12383501

List Price: **\$1,075,000**

New Listing

Haliburton/Dysart et al/Guilford



Tax Amt/Yr: **\$3,707.02/2025** Transaction: **Sale**
 SPIS: **No** DOM: **0**
 Legal Desc: **PT RDAL IN FRONT OF LT 24 CON 5 HAVELOCK PT 2 19R9407 (CLOSED BY HA24721); LT 45 PL 513 SRO SIT RIGHT IN H51074 UNITED TOWNSHIPS OF DYSART, DUDLEY, HARCOURT, GUILFORD, HARBURN, BRUTON, HAVELOCK, EYRE AND CLYDE**

Style: **Bungalow Raised** Rooms Rooms+: **8+0**
 Fractional Ownership: **BR BR+: 4(4+0)**
 Assignment: **Baths (F+H): 1(1+0)**
 Link: **No** SF Range:
 Storeys: **SF Source:**
 Lot Front: **106.00** Fronting On:
 Lot Depth: **193.26**
 Lot Size Code: **Feet**

Zoning: **WR4**
 Dir/Cross St: **ON-118 W to Kennis Lake Road to Watts Road and follow to #2375**

PIN #: **391090339**
 Holdover: **60**
 Possession: **Flexible**

ARN #: **462406100010200** Contact After Exp: **No**

Possession Date:

Kitch Kitch + **1 (1+0)**
 Island YN: **No**
 Fam Rm: **No**
 Basement: **/None**
 Fireplace/Stv: **Yes**
 Fireplace Feat: **Living Room, Wood Stove**
 Interior Feat: **None**
 Parking Feat: **Private Double**
 Heat: **Baseboard, Electric**
 A/C: **/None**
 Central Vac: **No**
 Laundry Lev: **Main**
 Property Feat: **Asphalt Shingle**
 Roof: **Piers**
 Foundation:
 Soil Type:
 Alternate Power: **None**

Exterior: **Alum Siding, Wood**
 Garage: **Yes**
 Gar/Gar Spcs: **Detached Garage/3.0**
 Drive Pk Spcs: **6.00**
 Tot Pk Spcs: **9.00**
 Pool: **None**
 Room Size:
 Rural Services: **Cell Services, Electrical, Internet High Speed**

Security Feat:

Water: **Other**
 Water Supply Type: **Lake/River**
 Water Supply: **Heatd Waterline, UV System**
 Water Meter:
 Waterfront Feat: **Not Applicable**
 Waterfront Struc: **Not Applicable**
 Well Capacity:
 Well Depth:
 Sewers: **Septic**
 Special Desig: **Unknown**
 Farm Features:
 Winterized: **Partial**

Water Name: **Little Kennis Lake**
 Waterfront Y/N: **Yes**
 Water Struct: **Not Applicable**
 Water Features: **Not Applicable**
 Under Contract:
 Access To Property: **Yr Rnd Municipal Rd**
 Shoreline: **Clean, Sandy**
 Shoreline Road Allowance: **Owned**
 Docking Type: **Private**
 View: **Lake, Trees/Woods**

Waterfront: **Direct**
 Easements/Restr: **Unknown**

Waterfront Frontage (M): **32.31**

Dev Charges Paid:

HST App To SP: **Included In**

Shoreline Exposure:

Water View: **Direct**
 Lot Shape:

Channel Name:
 Lot Size Source: **GeoWarehouse**

Remarks/Directions

Client Rmks: **Welcome to this charming 4 bedroom, 1 bathroom waterfront cottage on highly desirable Little Kennis Lake chain. Set on a rare, level lot with coveted southern exposure, the property enjoys all-day sunshine and an ideal setting for both relaxation and family fun. The sandy beach is perfect for children, while mature trees provide nice privacy. With the added convenience of year-round access via a municipal road, this location offers the best of cottage living. An oversized 24 x 36 garage provides excellent storage and the potential to create an additional 1-bedroom, 1-bathroom suite. Meticulously maintained and thoughtfully upgraded, recent improvements include a newer 5-bedroom septic system, new roof, fresh exterior paint, and a newly built garage. This is a rare opportunity to own an exceptional piece of waterfront paradise.**

Inclusions: **As Viewed except for noted exclusions**

Listing Contracted With: **RE/MAX Professionals North 705-457-1011**

Prepared By: **AMANDA TANCREDI, REALTOR Salesperson**

Date Prepared: **09/05/2025**

Rooms

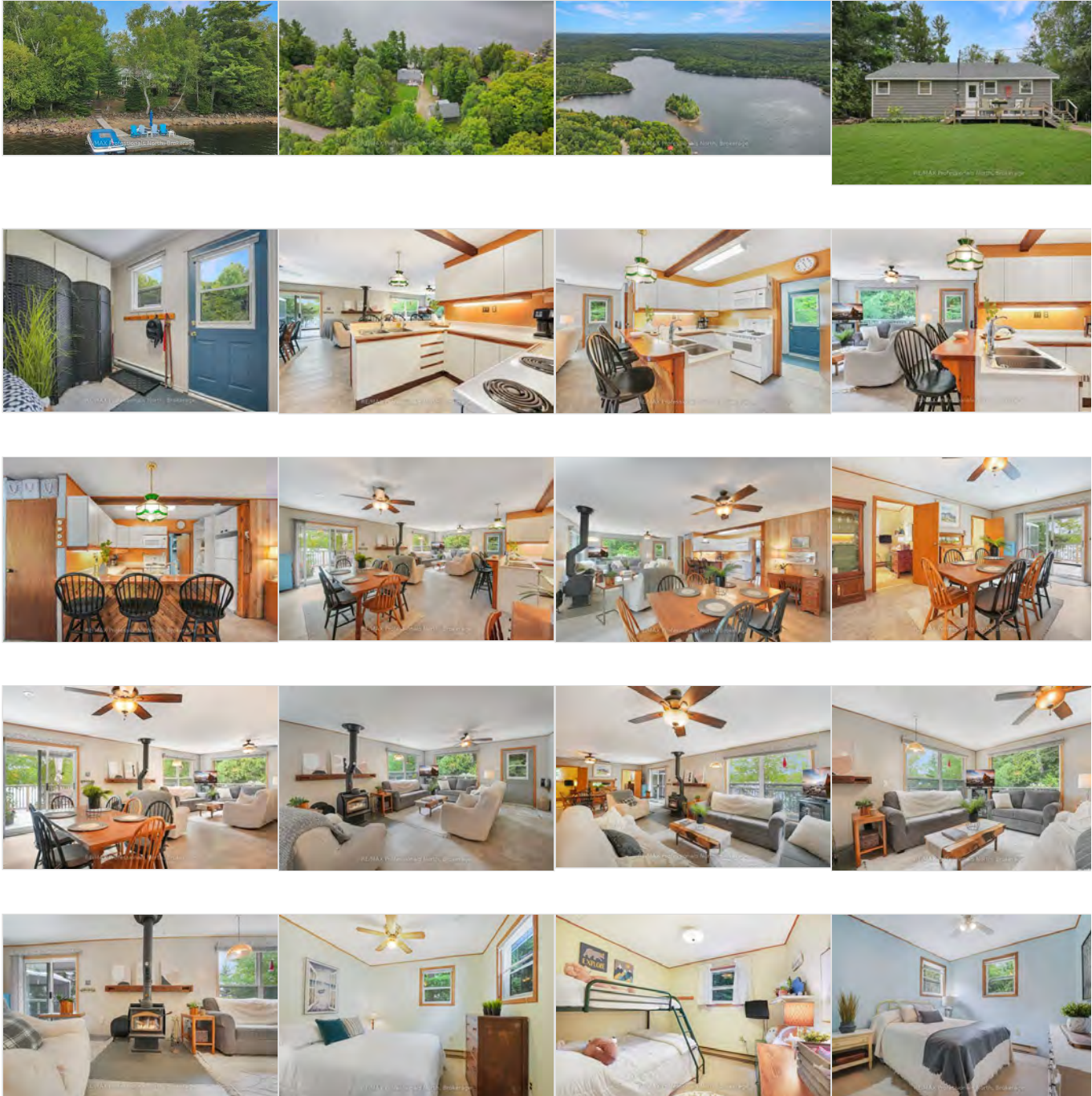
MLS® #: X12383501

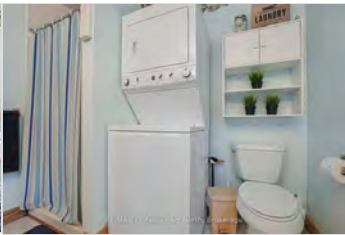
Room	Level	Dimensions (Metric)	Dimensions (Imperial)	Bathroom Pieces	Features
Foyer	Main	3.23 M X 1.55 M	10.59 Ft x 5.08 Ft		
Kitchen	Main	2.4 M X 3.66 M	7.87 Ft x 12.00 Ft		
Bedroom	Main	3.05 M X 2.77 M	10.00 Ft x 9.08 Ft		
Living Room	Main	4.82 M X 9.14 M	15.81 Ft x 29.98 Ft		Combined w/Dining
Bedroom	Main	3.05 M X 2.74 M	10.00 Ft x 8.98 Ft		
Bedroom	Main	2.99 M X 2.74 M	9.80 Ft x 8.98 Ft		
Primary Bedroom	Main	3.59 M X 2.99 M	11.77 Ft x 9.80 Ft		
Bathroom	Main			3	

Photos

MLS® #: X12383501

[2375 Watts Road, Dysart, Ontario K0M 1S0](#)







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Chattels

Included

- As Viewed, except noted exclusions

Excluded

- Personal Items
- All outdoor furniture
- Barbecue
- Seadoo and tin boat
- Grey sofa and Love seat
- Coffee table
- China cabinet
- Kitchen table and chairs
- Antique side board
- Desk and chair
- C table
- All decor
- Bed and dresser in main bedroom
- Cedar chest and dresser in kids room
- Bedside tables and lamps in front bedroom
- TV and cabinet
- Portable 4 season heater
- Bed and rug in loft
- Book shelf and side table in loft
- **Negotiable items:**
 - Shipping container
 - 1996 Grew Cutter



Seller



Buyer



"The Heart of the Highlands"

Municipality of Dysart et al
P.O. Box 389, 135 Maple Avenue
Haliburton, Ontario K0M 1S0
705-457-1740
Fax: 705-457-1964
www.dysart.ca

BUILDING DEPARTMENT

SITE INSPECTION REPORT AND SEWAGE SYSTEM PERMIT

Septic Permit Number:

2018-098

Owner:

46-24-061-000-10200-0000

Municipal Roll Number:

PLAN 513 LOT 45 PT SHORE RD ALLOW AND RP 19R9407 PART 2

Legal Description:

2375 WATTS RD

Address:

August 21, 2018

Date:

1. Assessment of Property

a) Surface drainage	<input checked="" type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor
b) Slope of ground:	<input checked="" type="checkbox"/> level	<input type="checkbox"/> gradual	<input type="checkbox"/> steep
c) Clearances (horizontal)	<input checked="" type="checkbox"/> satisfactory	<input type="checkbox"/> unsatisfactory	
d) Percolation rate:	<input type="checkbox"/> 4-12 min/cm	<input type="checkbox"/> measured	<input checked="" type="checkbox"/> estimated

2. Decision: On the basis of your application the property is:

- a) Acceptable if system is installed as outlined in item 3 below ☒
b) Not acceptable; Reason recorded under item 3 ☐

An applicant may appeal a decision in writing to:
The Building Code Commission
777 Bay Street, 2nd Floor
Toronto, Ontario M5G 2E5

TEST PIT SOIL CONDITIONS

Depth (metres)	Soil Type
0.0	
0.5	ORGANICS
1.0	
1.5	
Show rock elevation	UND
Show water table	UND

3. Approved design of the sewage system includes:

a) Working capacity of septic tank:	5000 litres	Holding tank:		litres
b) Length of absorption trench required:				metres
c) Filter bed area:	34 sq. m	Filter sand contact area:	34	sq. m
d) Loading rate area:	250 sq. m	15 metre constructed mantle required:		
e) Size of system is based on:	5 bedrooms and/or 9 fixture units			
Area of building:	156 sq. m	Commercial details:		
Total daily design sewage flow:	2500 litres			

IF ANY DEVIATION IS NECESSARY, APPROVAL MUST BE OBTAINED PRIOR TO INSTALLATION

Comments:

REPLACEMENT/ENLARGEMENT OF EXISTING SYSTEM
METAL SHED WITHIN MANTLE TO BE REMOVED FOR FINAL
AGGREGATE SHEET REQUIRED FOR FINAL
RAISED BED, SETBACKS INCREASED TO SIDE LOT LINE
PUMP AND REMOVE/BURY EXISTING SEPTIC TANK

NOTE: It is an offence to use a system without a Sewage System Installation Report Permit. In order to issue a Sewage System Installation Report Permit, an inspection prior to the backfilling of your completed system is required. It is the owner's responsibility to ensure that this is done.

This Permit under the Ontario Building Code Act is hereby issued for the proposal outlined in the corresponding application and design submitted for approval.

Inspected by: Greg Cherniak

Date: August 15, 2018

Issued by:

Chief Building Official, Karl Korpela

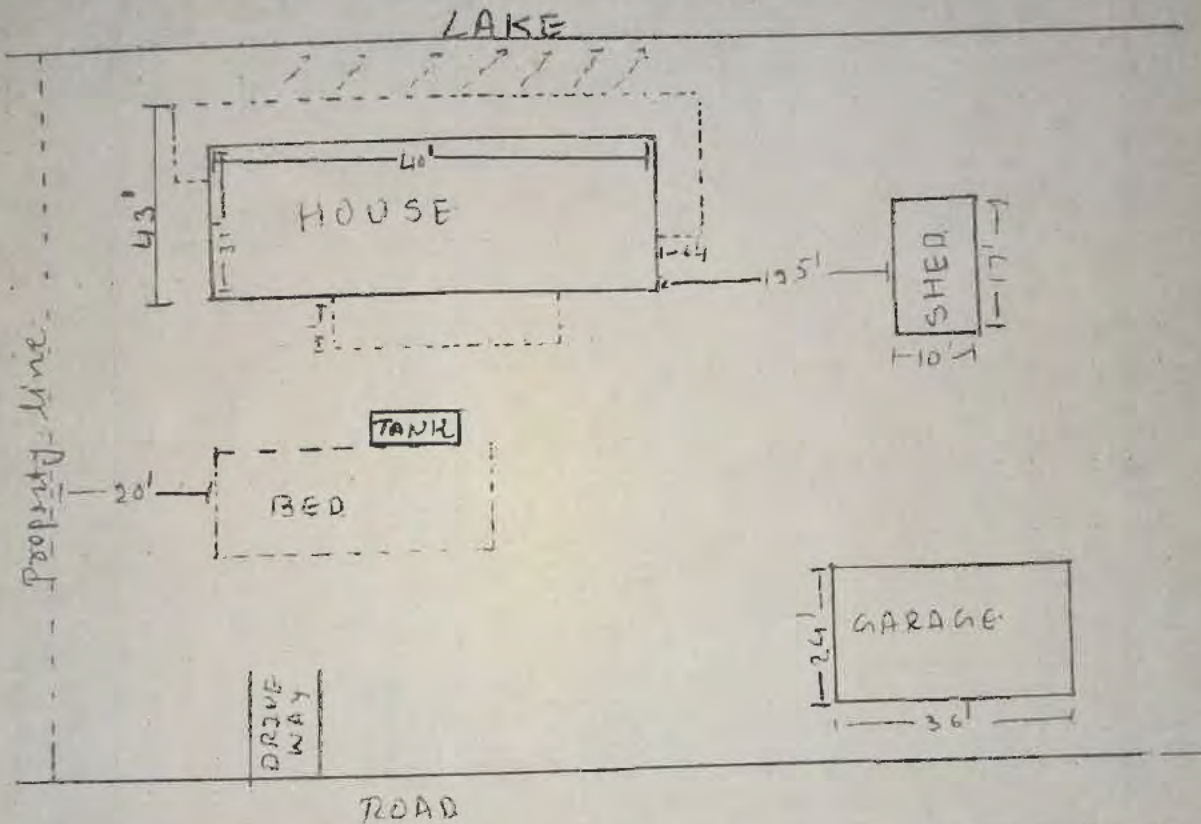
Date: August 21, 2018

AS BUILT SITE PLAN

Indicate North Point and label the following required information:

1. Septic Tank & Leaching Bed	8. Driveways / Parking Area
2. Pump Chamber	9. Property Lines
3. Loading Rate Area	10. Foundation / Eavestrough Drainage
4. 15 metre Mantle Area	11. Lake / watercourse / pond
5. Proposed/ Existing Structures	12. Steep slopes
6. Water Supplies	13. Direction of slope/water flow
7. Existing Sewage Systems	

2375 Watts Rd



Larry Everitt Installer/ Site Supervisor	Larry Everitt Signature	June 18/20 Date
---	----------------------------	--------------------

Septic Tank Information	
5700 litre Size	Roth Manufacturer
RMT 1500 Model	
Septic Field Information	
Distribution Pipe (Circle One): Filter Bed Dimensions OR Absorption Trench	Chamber OR Pipe 4m x 9m = Runs of m = m
Pump Chamber Size:	Pump Model#

19-098
RECEIVED
JUN 19 2020
BUILDING DEPT



Your account number is:

2001 0764 3392

This statement is issued on:

August 20, 2025

Your Electricity Statement

For the period of: June 6, 2025 - August 8, 2025

What do I owe?

\$158.⁰⁰

See reverse for a
summary of your charges

How much did I use?

You powered your home with



1,262 kWh
of electricity this period

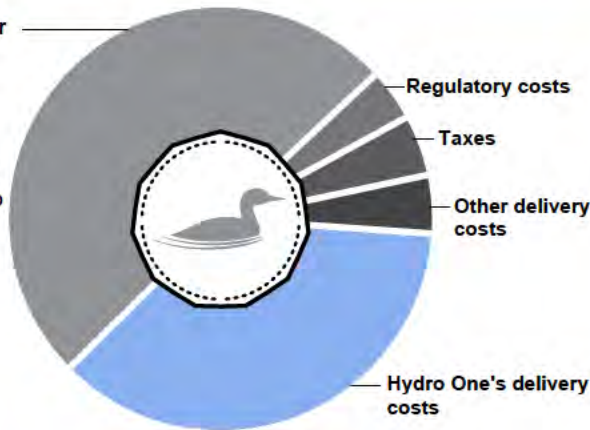
When is it due?

**Sep 9,
2025**

Shedding light on your electricity statement

To the electricity generators for
the electricity you use

Electricity prices are set by the
Ontario Energy Board (OEB).
Hydro One collects electricity
charges and passes them to the
IESO. These charges are used to
cover the cost of electricity
generation.



What do I need to know?

Total Ontario support: \$93.93. To learn more about the province's electricity support programs, visit [Ontario.ca/yourelectricitybill](https://ontario.ca/yourelectricitybill).

Adjustment of previously billed period from 2025-06-06 to 2025-07-08 includes HST reversal of \$15.79.

Notice: The amount of Distribution Rate Protection on your bill is changing to account for inflation, effective July 1, 2025. The OEB has adjusted the subsidy threshold to \$42.88 per month and as a result a typical customer will see an increase of \$1.49 on their monthly bill.



For billing, quick answers
and much more, visit
www.HydroOne.com



For emergencies or reporting
outages
1-800-434-1235 (24 hrs)



For service inquiries
and payment
1-888-664-9376
Mon to Fri 7:30 a.m. - 8 p.m.



Hydro One Networks Inc.
PO Box 5700
Markham, ON L3R 1C8

Please return this slip with your payment.

Your account number: 2001 0764 3392



Total amount you owe **\$158.00**

Amount enclosed

\$

HYDRO ONE NETWORKS INC.
PO BOX 4102 STN A
TORONTO ON M5W 3L3

2001076433920000158007



What am I paying for?

Balance carried forward from previous statement	-\$158.00
Amount from your previous period	\$158.00
Amount we received on Jun 30/25	-\$158.00
Amount we received on Jul 31/25	-\$158.00
Your Budget Billing Plan amount	\$316.00
Total amount you owe	\$158.00



Powering 2375 WATTS RD

Point of Delivery: 10906593

Residential - Medium Density

Electricity \$70.80

This is the cost of generating the electricity you used this period. Usage is measured in kilowatt-hours (kWh) and depends on the wattage of devices you use and how long you use them. The Ontario Energy Board (OEB) sets the cost per kWh and the money collected goes directly to the electricity generators.

Delivery \$62.42

This is the cost of ensuring you have reliable power when you need it. **Hydro One** collects this money to build, maintain and operate the electricity infrastructure, which includes power lines, steel towers and wood poles covering 960,000 sq. km. A portion of this cost is fixed and a portion varies depending on the amount of electricity used.

Regulatory Charges \$4.73

The Independent Electricity System Operator (IESO) uses this money to manage electricity supply and demand in the province, which is necessary to ensure that there is enough electricity to meet Ontario's needs at all times.

HST (87086-5821-RT0001) \$17.93

Ontario Electricity Rebate -\$18.07

Total of your electricity charges \$137.81

Your Budget Billing Plan amount from Jul 9/25 to Aug 8/25 \$242.00

Starting on your next bill we have adjusted your Budget Billing Plan amount to \$148.00 to help keep your payments in line with your actual charges.



Continued on page 3

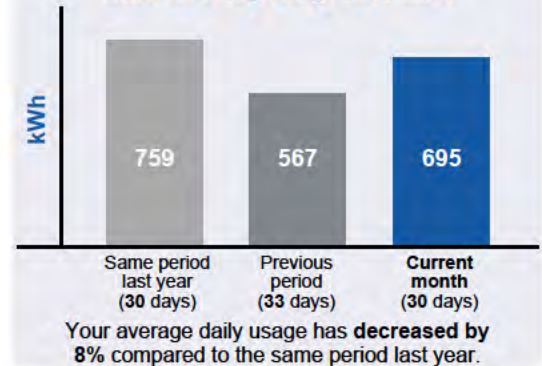
This statement includes adjustments to previous statements.

If payment is not received by Sept 9, 2025, a late payment charge of 1.5% compounded monthly (19.56% per year) will be calculated from the statement date and applied to your account.

What is my Time-of-Use breakdown?

Jul 9/25 to Aug 8/25	Usage (kWh)	Rate (\$)	Amount
TOU On-Peak	140.8304	15.8	\$22.25
TOU Mid-Peak	139.9211	12.2	\$17.07
TOU Off-Peak	414.1980	7.6	\$31.48

What does my usage look like?



Hydro One - How the System Works

Hydro One's role is to make sure that Ontario's electricity can flow directly to you, our customers, through our system safely and reliably.



Energy Saving Tip

Phantom Power

Electronics use energy even when off. Plug them into power bars with timers or auto-shutoff to lower energy use.



Continued from page 2

**Your billing period from Jun 6/25 to Jul 9/25**

Electricity	\$56.08
Delivery	\$61.44
Regulatory Charges	\$3.92
HST (87086-5821-RT0001)	\$15.79
Ontario Electricity Rebate	-\$15.91
Total of your electricity charges	\$121.32
Your Budget Billing Plan amount from Jun 6/25 to Jul 9/25	\$74.00

What is my Time-of-Use breakdown?

Jun 6/25 to Jul 9/25	Usage (kWh)	Rate (¢)	Amount
TOU On-Peak	97.7068	15.8	\$15.44
TOU Mid-Peak	109.1948	12.2	\$13.32
TOU Off-Peak	359.4955	7.6	\$27.32

**Your Budget Billing Plan Summary**

Actual charges billed to date (including this bill)	\$888.40
Budget Billing Plan amounts billed (including this bill)	<u>-\$948.00</u>
Balance remaining in your plan	-\$59.60

Meter reading details

Meter Number	Current Reading	Previous Reading	Difference	Usage in kWh
J3142584	Aug 8/25 63910.1048	Jun 6/25 62648.7584	1261.3464	(x1) = 1261.3464



www.wettinc.ca
@WETT_CA

MYERS CHIMNEY

This inspection form is provided to WETT members as a recommended part of completing a WETT Inspection™. If this form is modified in any way from the official form provided by WETT, it will no longer be considered to be an official WETT Inspection™ form.

Company: Myers Chimney
Address: 2224 South Lake Rd.
Website: www.myerschimney.ca
Email: myerschimney@hotmail.com
Phone: 705-286-1245

REQUESTED BY:

Name: _____
Address: 2375 Watts Rd.
Email: _____
Phone: _____
Cell Phone: _____

Inspector's name: Ian Myers

Reason(s) for inspection: Insurance

Type of inspection requested: ☒ Visual ☐ Technical ☐ Invasive

Date of request: _____

INSPECTION LOCATION: ☒ Same as requested or:

Name: _____
Address: _____
Email: _____
Phone: _____
Cell Phone: _____

WETT #: 7688

TURN TO PAGE 9 FOR THE INSPECTION SUMMARY

Date of inspection: 08/19/2025

- 1. Visual Inspection:** This inspection includes the following:
- Measurements of clearances.
 - Opening stove doors and all ground-accessible dampers/clean-out doors.
 - Visual inspection of the chimney from the ground.
 - WETT report documenting all noted deficiencies and red flags that may require a more detailed inspection, including all mandatory photos in the WETT Inspection Standards of Practice (SOP).
 - Easily visible portions of the flue (such as first tiles of an open fireplace or top section if the inspector has accessed the roof).

- 2. Technical Inspection:** This inspection includes the following:
- All visual elements of the system as indicated in **Visual** Inspection.
 - Hands-on work which may include:
 - Taking apart flue pipes,
 - Opening clean-outs,
 - Entering the attic to view additional system components,
 - Accessing the chimney on the roof.
 - Review of condition of components removed or exposed through hands-on work and quantity of creosote noted in components and where visible in chimney sections.
 - All observations and recommendations documented on WETT Inspection forms, including work completed and areas accessed, along with all mandatory photos.

- 3. Invasive Inspection:** This inspection includes the following:
- All visual elements of the system as indicated in **Visual** Inspection.
 - All hands-on work as indicated in **Technical** Inspection.
 - General construction work to building elements including:
 - Opening of walls or ceilings,
 - Disassembly or invasive work on masonry or prefab chimneys,
 - Examination of chimney liners,
 - All observations and recommendations documented on WETT Inspection forms, including work completed and areas accessed, along with mandatory photos.

- Inspection Results:** Indicate inspection results for each component. **Code compliance** = proper use of listed components. N/A = Not Applicable. UTI = Unable To Inspect.
- Suitable (Suitability)** refers to system components that appear to be mechanically and structurally able to provide their designed and intended function.
- Unsuitable** refers to components, or parts thereof, that are not mechanically or structurally suitable to maintain the function they were intended to perform.
Note: an appliance that has been modified is no longer a certified appliance.
- This inspection report only documents the conditions at the time of inspection.
- All **non-compliance** ratings should be considered for comment. See "Comments" page(s).
- An inspection, at any level, can be expected to include some components marked **UTI**.
- Manufacturer's specific instructions/**CSA B365**/building code shall be used to complete this inspection form.
- Appliances are not fired as part of an inspection. This is not a performance inspection.
- The electrical system is not part of a solid-fuel inspection.
- Documentary evidence, including a valid certification number of the attending WETT-certified professional, is a mandatory requirement of the inspection process.
- Persons signing a declaration must have physically inspected the work.
- Use one inspection form per appliance. In a multi-chimney situation, this inspection form is limited to the related appliance.
- Inspectors are checking for **"Code Compliance."** They do not "Pass" or "Fail."
- Inspectors do not certify the appliance or the installation.
- Inspectors do not issue a WETT certificate with an inspection, they issue an inspection report.

Has the type of inspection been discussed prior to inspection? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Appliance Make/Model/Serial #: <u>Wolf Steel/ Napoleon/ NC-16</u>
Are copies of building permit/s available? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Installation manual available: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Original <input type="checkbox"/> Web download
Time of day: Hours: <u>10</u> Minutes: <u>00</u> AM/PM <u>AM</u>	Certification Standard: <input checked="" type="checkbox"/> ULC S627 <input type="checkbox"/> EPA <input type="checkbox"/> CSA B415 <input type="checkbox"/> Uncertified <input type="checkbox"/> Unknown
Weather conditions (ice, snow, wind, rain, thunderstorm, sunny): <u>sunny</u>	Listing Agency: <input type="checkbox"/> ULC <input type="checkbox"/> CSA <input checked="" type="checkbox"/> WH/ETL <input type="checkbox"/> OTL <input type="checkbox"/> Other/Comments: _____
Roofing type/material: <u>shingles</u>	Alcove approved: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Roof accessed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Attic accessed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mobile home approved: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Chimney Make / Model: <u>Oliver Macleod HTC</u>	Flue Collar Size: <u>6"</u>
Installation manual available: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Original <input type="checkbox"/> Web download	Is there a fan or blower attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Listing Agency: <input checked="" type="checkbox"/> ULC <input type="checkbox"/> CSA <input type="checkbox"/> WH/ETL <input type="checkbox"/> OTL <input type="checkbox"/> Other: _____ UTI: _____	Comments/condition of appliance (baffle plate, air tubes, bricks, gaskets, etc.): Suitable <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Certification Standard: <input type="checkbox"/> ULC S604 <input checked="" type="checkbox"/> ULC S629 <input type="checkbox"/> Other: _____ <input type="checkbox"/> Unknown	Installed in: <input checked="" type="checkbox"/> Residence (Part 9) <input type="checkbox"/> Modular Home (A277) <input type="checkbox"/> Mobile Home/Manufactured (Z240) <input type="checkbox"/> Alcove <input type="checkbox"/> Garage <input type="checkbox"/> Other: _____
Comments/Condition of chimney (dents, corrosion, perforations, heat marks on outer wall, distortion, bulging, misaligned inner liner sections) Suitable <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (See notes)	Appliance location: <input type="checkbox"/> Basement <input checked="" type="checkbox"/> Main Floor <input type="checkbox"/> Other (specify): _____
<input checked="" type="checkbox"/> Inside installation <input type="checkbox"/> Outside installation	Appliance Installed by: _____ Date: _____ <input checked="" type="checkbox"/> Unknown
Chimney Installed by: _____ <input checked="" type="checkbox"/> Unknown Date: _____	Height of Chimney <input type="checkbox"/> UTI <u>9ft</u>

WOOD STOVE, FLUE PIPE (CSA B365-17) & MANUFACTURED CHIMNEY

CLEARANCE TO	REQUIRED	ACTUAL	CODE COMPLIANCE	PHOTOS TAKEN
1. Combustible right side wall	21"	60"+	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
2. Combustible left side wall	21"	60"+	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
3. Combustible rear wall	8.5"	19.5"	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
4. Combustible corner – right side (45 degrees)			<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
5. Combustible corner – left side (45 degrees)			<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
6. Top/ceiling	82"	108"	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes

CLEARANCES/REQUIREMENTS	REQUIRED	ACTUAL	CODE COMPLIANCE	PHOTOS TAKEN
7. Shielding ceiling			<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
8. Wall shielding – rear			<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
9. Wall shielding – right side			<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
10. Wall shielding – left side			<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
11. Ember pad material	Continuous, durable, non-combustible	tiles	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
12. Ember pad – front	Minimum 18"	28"	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
13. Ember pad – rear	Minimum 8"	9"	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
14. Ember pad – right side	Minimum 8"	18"	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
15. Ember pad – left side	Minimum 8"	18"	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes

CLEARANCES/REQUIREMENTS	REQUIRED	ACTUAL	CODE COMPLIANCE	PHOTOS TAKEN
16. Radiant heat floor protection material – uncertified appliance	CSA B365-17: 8.1.4	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
17. Radiant heat floor protection material – certified appliance	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
18. Hazardous location	CSA B365-17: 4.3	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
19. Outdoor combustion air	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
20. Is CO alarm present in the same room with solid-fuel-burning appliance?	9.32.4.2.3 (BCBC)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes
21. Is CO alarm present in the same room with solid-fuel-burning appliance?	9.32.3.9.3 (ABC)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes
22. Is CO alarm present?	9.33.4.2 (OBC)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes

It is the homeowner's responsibility to ensure that the CO alarm is in working condition and installed in accordance with applicable codes.
NOTE: WETT inspectors do not test the CO alarm, they just note if it is present.



FLUE PIPE

Flue Pipe/ Connector: Type: ☐ Single-wall ☒ Double-wall ☐ ULC S641 Diameter: 6"
 Manufacturer: Selkirk Model DPS Listing Agency: ulc Is manual available? ☐ Yes ☒ No

FLUE PIPE/ CONNECTOR REQUIREMENTS	REQUIRED		ACTUAL		CODE COMPLIANCE	PHOTOS TAKEN
	Uncertified	Certified				
23. Wall clearances – right side	Unshielded 18"	Shielded 9"	<u>6"</u>	<u>60"+</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
24. Wall clearances – left side	18"	9"	<u>6"</u>	<u>60"+</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
25. Wall clearances – rear wall	18"	9"	<u>6"</u>	<u>9"</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes

FLUE PIPE/ CONNECTOR REQUIREMENTS	REQUIRED		ACTUAL	CODE COMPLIANCE	PHOTOS TAKEN
	Uncertified	Certified			
26. (a) Clearances - horizontal pipe	18"	9"	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
26. (b) Clearances – ceiling	18"	9"	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
27. Total length	Maximum 10'	60"	Actual(s) _____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
28. Elbows	Maximum 180°	3-45's	Actual(s) _____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
29. Fastening	3 screws per joint	_____	_____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
30. Allowance for expansion	Elbow/ slip/ adjust	_____	Actual(s) _____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
31. Flue pipe orientation	Male end down	_____	_____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
32. Joint overlap	Min 30 mm (1-3/16")	_____	_____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
33. Flue pipe slope	Min ¼" per foot	_____	_____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
34. Material – steel or other non-combustible material with a melting point of not less than 1100 °C (2000 °F)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
35. Minimum thickness of flue pipe	_____	_____	_____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
36. Flue pipe condition	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
37. Pipe shielding present	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
38. Support: horizontal present	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
39. Barometric damper present CSA B365-17: 4.4.4	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
40. Flue-mounted heat reclaimers present CSA B365-17: 4.4.1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
41. Does the flue pipe pass through floors or ceilings?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
42. Connection to factory-built chimney – Mfr. instructions	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes

COMPONENT/CLEARANCE	REQUIRED	ACTUAL	CODE COMPLIANCE	PHOTOS TAKEN
43. Minimum horizontal extension beyond inside wall surface	_____	_____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
44. Maximum horizontal extension beyond inside wall surface	_____	_____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
45. Wall radiation shield	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
46. Base tee and cap	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
47. Base tee support	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
48. Wall support/band	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
49. Distance between supports	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
50. Chimney offsets	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
51. Offset support	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
52. Firestopping	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
53. Ceiling support	<input checked="" type="checkbox"/> Flat <input type="checkbox"/> Cathedral	_____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
54. Minimum vertical extension below ceiling	_____	'fixed'	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
55. Attic radiation shield	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes

COMPONENT/CLEARANCE	REQUIRED	ACTUAL	CODE COMPLIANCE	PHOTOS TAKEN
56. Is attic radiation shield above insulation level?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
57. Other radiation shield(s)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
58. Enclosed through living space	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
59. Roof flashing/storm collar	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
60. Rain cap	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
61. Rain cap spark arrestor	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
62. Roof braces	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
63. Roof brace solidly anchored	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
64. Height above roof surface	Min – 900 mm (3'/36")	6ft _____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
65. Height within 3 m (10')	Min – 600 mm (2'/24")	36" _____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
66. Chimney height above chase cap	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> UTI	<input type="checkbox"/> Yes
67. Chimney clearance to combustibles	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> UTI	<input type="checkbox"/> Yes
68. Other areas of chimney enclosed or hidden	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> UTI	<input type="checkbox"/> Yes

69. Fire Code = 2.6.1.4. Chimneys, Flues and Flue Pipes

(1) Every chimney, flue and flue pipe shall be inspected to identify any dangerous condition

a) at intervals not greater than 12 months, **b)** at the time of addition of any appliance, and **c)** after any chimney fire.

70. Fire Code = 2.6.1.4.

(2) Chimneys, Flues and Flue Pipes shall be cleaned as often as necessary to keep them free from dangerous accumulations of combustible deposits.

Appendix A – A.2.6.1.4 (2) The presence in a chimney of deposits of soot or creosote in excess of 3 mm thick will indicate the need for immediate cleaning, possible modification of burning procedures and more frequent inspections.

(Amount of creosote should be noted in comments section.)

71. Fire Code = 2.6.1.4 3) A chimney, or flue pipe shall be replaced or repaired to eliminate

a) any structural deficiency or decay

Appendix A – A.2.6.1.4 (3) (a) Structural deficiencies are deviations from required construction, such as the absence of a liner or inadequate design of supports or ties. Instances of decay are cracking, settling, crumbling mortar, distortion, advanced corrosion, separation of sections, or loose or broken supports

72. Fire Code = 2.6.1.4. 3) A chimney, flue, or flue pipe shall be replaced or repaired to eliminate

b) all abandoned or unused openings that are not effectively sealed in a manner that would prevent the passage of fire or smoke.

File reference #: _____

Photos taken: ☒ Yes ☐ No Number of photos: 3

This checklist contains: _____ pages in total | This report contains: 9 pages in total.

Comments and observations:

All non-compliance ratings should be considered for comment. Add number of non-compliance line. More pages may be added.

SUMMARY:

This installation meets the requirements of the manufacturers within the scope of a Level 1 Visual inspection.

This inspection was performed by Josh Truax as confirmed by my signature below: Ian Myers

Please attach additional page(s) if needed

Customer signature: _____

Inspector signature: Ian Myers

Digitally signed by Ian Myers
Date: 2025.09.05 09:15:37 -04'00'

Inspector WETT #: 7688

Date: _____

Date: 09/05/2025

PHOTOS:

Section #: _____



Napoleon NC-16

Section #: _____



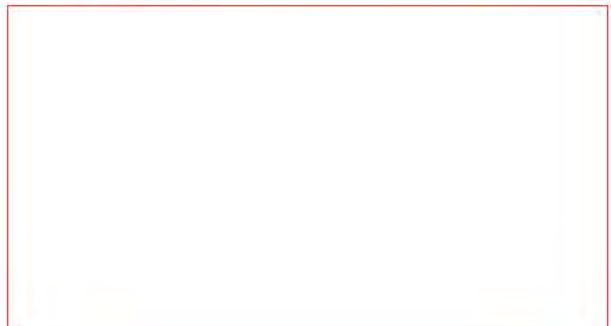
Stove certification label

Section #: _____



Oliver Macleod chimney system

Section #: _____





Municipality of Dysart et al

P.O. Box 389
135 Maple Ave
Haliburton ON K0M 1S0
(705) 457-1740
Email: tax@dysartet.al.ca

Group Code

TAX NOTICE

Final	2025
Billing Date	May 5, 2025

Mortgage Company				Bill No. 518101			
Roll No. 061-000-10200-0000				Mortgage No.			
Name and Address				Municipal Address/Legal Description			
				2375 WATTS RD PLAN 513 LOT 45 PT SHORE RD ALLOW AND RP 19R9407 PART 2			
Assessment		Municipal Levy		County Levy		Education Levy	
Class	Value	Class/Educ. Support	Tax Rate(%)	Amount	Tax Rate(%)	Amount	Tax Rate(%)
RTEP	\$ 479,000.00	Res/Farm Tr-Full - EPubSup	0.00352175	\$ 1,686.92	0.00768732	\$ 1,287.23	0.00153600
							\$ 732.87
Sub Totals >>>		Municipal Levy		\$ 1,686.92	County Levy		\$ 1,287.23
					Education Levy		\$ 732.87
Special Charges				Summary			
By Law #	Description	Amt	Exp Year	Due Date	Amount		
				7/9/2025	\$ 1,896.12	Sub-Total - Tax Levy	
				9/10/2025	\$ 970.00	Special Charges/Credits	
						2025 Tax Cap Adjustment	
						Final 2025 Levies	
						Less Interim Tax Notice	
						Past Due Taxes/Credit	
Total Special Charges		\$ 0.00		Total Amount Due		\$ 2,866.12	

Schedule 2		
Explanation of Tax Changes 2024 to 2025		
Final 2024 Levies	Final 2025 Levies	Total Year Over Year Change
\$ 3,533.39	\$ 3,707.02	\$ 173.63
Final 2024 Levies	\$ 3,533.39	
* 2024 Annualized Taxes	\$ 3,533.39	
2025 Local Municipal Levy Change	\$ 74.78	
2025 County Levy Change	\$ 78.58	
2025 Provincial Education Levy Change		
2025 Tax Change Due to Reassessment	\$ 22.27	
** Final 2025 Levies	\$ 3,707.02	

* Adjusted and final tax amounts apply only to the property or portion(s) of property referred to in this notice and may not include some special charges and credit amounts.

Municipality of Dysart et al
P.O. Box 389
135 Maple Ave
Haliburton ON K0M 1S0
(705) 457-1740



Municipality of Dysart et al
P.O. Box 389
135 Maple Ave
Haliburton ON K0M 1S0
(705) 457-1740



Schedule 3		
Explanation of Property Tax Calculations		
Commercial	Industrial	Multi-Res.

2025 CVA Taxes		
* 2024 Annualized Taxes		
2025 Tax Cap Amount		
2025 Provincial Education Levy Change		
2025 Municipal Levy Change		
** 2025 Adjusted Taxes		

* An annualized tax figure is used in this analysis to compensate for mid-year adjustments in tax treatment or assessment value. If a property did not have any mid-year adjustments the annualized taxes should equal the Final tax amount listed above.

SECOND INSTALLMENT

PLEASE DETACH AND SUBMIT WITH PAYMENT

THANK YOU

Received from:	
Roll #	061-000-10200-0000
Name	
Address	
Due Date	Total Due
September 10, 2025	\$ 970.00



FIRST INSTALLMENT

PLEASE DETACH AND SUBMIT WITH PAYMENT

THANK YOU

Received from:	
Roll #	061-000-10200-0000
Name	
Address	
Due Date	Total Due
July 9, 2025	\$ 1,896.12



1,000
June 21/25
896.12 pd July 18/25

DATE Sept 14 2011 Greg Bishop
IMPERIAL: DISTANCES SHOWN HEREON
ARE IN FEET AND CAN BE CONVERTED
TO METRES BY MULTIPLYING BY 0.3048.

THE

PART	LOCATION	PIN	AREA
1	PART OF THE ORIGINAL SHORE ROAD ALLOWANCE IN FRONT OF LOT 24, CONCESSION 5	NO PIN	0.11 AC ±
2			0.10 AC ±
3			0.05 AC ±
4			0.05 AC ±

4
0.05 M +

NOTE

- ALL ELEVATIONS SHOWN HEREON ARE REFERRED TO THE SILL OF THE DAM AT THE TAIL RACE PIT. HAVING AN ARBITRARILY ASSIGNED ELEVATION OF 100.0 FEET. KOMENESS LAKE IS ARTIFICIALLY REGULATED TO CONTAIN AVERAGE WATER LEVEL OF 98.5 FEET (ARBITRARY DATUM). THE ORIGINAL HIGH WATER MARK OF KOMENESS LAKE SHOWN ON THIS MAP IS THE BEST AVAILABLE EVIDENCE OF THE HIGH WATER MARK EXISTING AT THE TIME OF THE ORIGINAL SURVEY OF THE TOWNSHIP OF HARVARD AND WAS DERIVED FROM THE SHOWN OR RECORDED PLAIN IN 511.
- THE ELEVATION OF ELEVATION OF THE UNSTAGOLATED HIGH WATER MARK AS SHOWN ON THIS MAP HAS BEEN DETERMINED FROM DATA OBTAINED BY PHOTOGRAPHIC MEASUREMENTS OF THE STAGOLATED HIGH WATER MARK USING PAPER CAMERA MEASUREMENTS ON THE

GENERATION DATA

INSTANCES AND COORDINATES SHOWN ON THIS PLAIN ARE IN FEET AND CAN BE CONVERTED TO METRES BY MULTIPLYING BY 0.3048

UTM GRID BEARINGS ARE DERIVED FROM OBSERVED REFERENCE POINTS A AND B HAVING A GRID BEARING OF N083°25'E INTERSECTED TO THE CENTRAL MERIDIAN UTM ZONE 17, MAG. 83 (NAD 83) (2011) (INVESTIGATION)

FOR BEARING COMPASS, A ROTATION OF 1°40'00" (COUNTED CLOCKWISE) WAS APPLIED TO BEARINGS ON REGISTERED PLAN

RESERVED REFERENCE POINTS (ORP's) UTM ZONE 17 MA083

UNIT ID	NORTHING	EASTING
REP A	16451334.37	2257154.488
REP B	16451491.53	2257280.151

LITTON
PROMOTES CANNOT, IN THEMSELVES, BE USED TO
ESTABLISH CORNERS OR BOUNDARIES SHOWING

SURVIVOR'S CERTIFICATE

...CERTIFY THAT

- THIS SURVEY AND PLAN ARE CORRECT AND IN ACCORDANCE WITH THE SURVEY ACT, THE SURVEYORS ACT AND THE LAND TITLES ACT AND THE REGULATIONS MADE UNDER THEM. THIS SURVEY WAS COMPLETED AUGUST 12, 2011.

AUGUST 15, 2011
MALIBU, CALIF. DENTARO

Greg Bishop
CONFIDENTIAL AND SENSITIVE

**GRIG BISHOP SURVEYING
AND CONSULTING LTD.**
ONTARIO LAND SURVEYOR

2375 Watts Road, Little Kennisis Lake



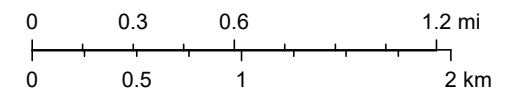
May 16, 2024

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Published by the County of Haliburton, 2023.



Scale: 1:36,112



2375 Watts Road, Little Kennisis Lake



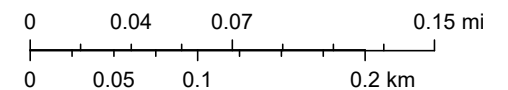
May 16, 2024

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Scale: 1:4,514







Municipality of Dysart et al: Interactive Zoning Map

<

Select feature
Total: 4

Parcel

●

Parcel: 4624061000102000000

Havelock Residential

Havelock Residential: WR4

Havelock Residential: WR4

Havelock Residential: WR4

Back

Little Kennisis Lake



1,000 ft



LITTLE KENNISIS LAKE



LOCATION	
Alternate Name	
Municipality	Dysart et al
Latitude (DMS)	451515
Longitude (DMS)	783557
Watershed	Gull

DEVELOPMENT	
Number of Properties	280
Capacity Status (2016)	Not at Capacity
Lake Association	Kennisis Lake Cottage Owners' Association
Lake Partner Program	Yes
CHA Member	Yes

MORPHOMETRIC FEATURES	
Surface Area (ha)	231
Watershed Area (ha)	6530
Shoreline Length (km)	14.83
Maximum Depth (m)	43.9
Mean Depth (m)	15.1
Total Lake Volume (10 ⁶ m ³)	34.87

FISH STOCKING	
FISH SPECIES	
Black Crappie	
Brook Trout	
Brown Bullhead	
Brown Trout	
Burbot	
Cisco	
Lake Trout	✓
Lake Whitefish	
Largemouth Bass	✓
Muskellunge	
Northern Pike	
Pumpkinseed	
Rainbow Smelt	
Rainbow Trout	
Rock Bass	
Round Whitefish	
Smallmouth Bass	✓
Splake	
Walleye	
White Sucker	
Yellow Perch	



WATER QUALITY – MINISTRY OF THE ENVIRONMENT, CONSERVATION AND PARKS

Total Phosphorus (mg/L)

Basin	Target	Average 2001-2009	Average 2014-2016	Current Status	Trend	Basin	Target	Average 2001-2009	Average 2014-2016	Current Status	Trend
Euphotic Zone (Surface)						Hypolimnetic Zone (Metre Over Bottom)					
1	< 0.01	0.009	0.005			1	< 0.01	0.005	0.006		
2	< 0.01	0.009	0.006			2	< 0.01	0.011	0.020		
Total	< 0.01	0.009	0.005			Total	< 0.01	0.007	0.012		

Mean-Volume Weighted Hypolimnetic Dissolved Oxygen (mg/L)

Basin	Target	Average 2001-2009	Average 2014-2016	Current Status	Trend
1	> 7	8.98	7.49		
2	> 7	8.13	6.34		

Water Clarity (m)

Basin	Target	Average 2001-2009	Average 2014-2016	Current Status	Trend
1	> 1.2	4.6	4.6		
2	> 1.2	3.8	4.0		

Calcium (mg/L)

Basin	Target	Average 2001-2009	Average 2014-2016	Current Status	Trend
1	> 2	2.0	2.0		
2	> 2	1.9	2.0		

Nitrate (mg/L)

Basin	Target	Average 2001-2009	Average 2014-2016	Current Status	Trend
1	< 3	0.117	0.085		
2	< 3	0.067	0.094		

Ph (no units)

Basin	Target	Average 2001 - 2009	Average 2014 - 2016	Current Status
Lake (average all basins)	6.5 - 8.5	6.6	6.5	