

## Town of Clarksburg 111 River Road Clarksburg, MA 01247 413-663-7940 B. J. Church - (413) 548-6633

\$35.00 \$20.00 per additional insp. if needed.

## Solid Fuel Burning Appliance and Metal Chimney Permit Application

Note: This application is not for Masonry Chimneys or Fireplaces. A Solid Fuel-burning appliance shall not share a common flue with a working fireplace nor with another appliance per 780 CMR Seventh Edition §6007.13.

## APPLICATION MUST BE COMPLETE PLEASE INCLUDE COMPLETE INSTALLATION INSTRUCTIONS

Check all that apply:					
Pellet stove with lal	bel & installation manua	1	Wood st	ove with label and insta	llation instructions
New manufactured metal chimney			Heatilator		Other
Property owner(s) name (as it a	ppears on deed):		<u> </u>		
Street	Tele:	Work #:		Мар:	Lot:
Installer:	License/HIC:		Street		
Town	Tele:		FAX:	Cell:	
Type of unit(s)		BTU		Testing Laboratory	
ASTME	UL listing number		(please inclose complet installation instructions)		
Distance from top of unit to ce	iling		Material on ceiling		
Distance rom walls to unit	North	South	East	West _	
Types of materails on walls	North	South	East	West	
Distance from windows, doors	, and other openings:	**************************************			
Distance from air intakes, gas r	meters, or vents:		***************************************		
Distance from Furniture or con	nbustibles to unit:				
Type and dimension of floor pr	rotection:				
Type of metal chimney:	be of metal chimney:UL listing		Size of metal chimney:		
Type of chimney:	Size of chimney:		Type of tthimble: Size of thimble:		
Type of flue:	Size of flue:		_Height of Chimney (	from lowest inlet to to	p)
Other appliances connected to	the same flue:		- Marin Time . ,	BTU out	put:
Type of smoke detector:		Type of Co	02 detector:		
The undersigned certifies that to The owner of this structure and proposed to be in compliance w 780 CMR §110.5 OF THE MAD PROPERTY, OR. BY AN AUTH LEITER OF AUTHORIZATIO	the undersigned agree to with all zoning regulation SS. BLDG. CODE REQUITED AGENT. IF	o conform to a ns and the Mas QUIRES EVER IT IS SIGNEL	ll applicable laws of ti sachusetts State Build BY APPLICATION TO DBY AN AGENT, A C	he town and state, and b ling Code. OBE SIGNED BY THE	elieve the work  OWNER OF THE
Signature of owner or authoriz	ed agent:				Date:
Annroyed			Denied		Date: