

Town of West Newbury

Date: _____ Fee: _____ Permit #: _____ Control #: _____
Solid Fuel-Fired Appliance Permit Application

Property Owner: _____

Address: _____

Telephone: _____

Contractor: _____

Address: _____

Telephone: _____

Liability Insurance _____ CSL #: _____

Worker's Comp. _____ HIC Registration #: _____

Is this: (choose one)

- ☐ New installation
☐ Replacement of an existing stove
☐ Inspection of existing installation

Is the stove connecting to: (choose one)

- ☐ New chimney
☐ Existing chimney

Is the stove connecting to a fireplace?

Yes ☐

No ☐

If yes, is the fireplace (choose one from below)

- ☐ New
☐ Existing

Stove: Make _____ Model _____

Value of Stove _____ Location of Stove _____

Material of Floor _____ Clearance to Floor _____

Material of Wall _____ Material of Ceiling _____

Chimney: Block ☐ Brick ☐ Metal ☐

Flue Type _____ Flue Size _____

Are there any other appliances connected to this flue? Yes ☐

No ☐

Application: Approved by: _____ Date: _____

Inspector of Buildings

The permit and installation inspections are limited to this stove only. The inspection does not pertain to stove construction, operation or the condition of the chimney. Changes to the installation of this appliance after the inspection is made shall render this permit null and void.