Town of West Newbury

Solid Fuel-Fired Appliance Permit Application

Date: __________________________ Fee: __________________________ Permit #: __________________________ Control #: __________________________

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.