



CITY OF NORTH ADAMS, MASSACHUSETTS

Inspection Services

Stove Installation Application

Date _____ Fee \$20.00 Permit _____

Circle one

Wood

Pellet

Coal

Name _____

Address _____

Phone number _____

Location of stove _____

Permit and Inspection Policies

- All devices **MUST** be inspected
- Permits will be issued at time of inspection (if applicable)
- Application is void if not inspected within 6 months
- Install per manufacturer's instructions or guidelines (see reverse side)

Return application along with payment to the Inspection Services department, room 100.

Name: _____

Date: _____

Address: _____

SOLID FUEL STOVE INSTALLATION CHECKLIST

COMPLETE THE INSTALLATION CHECKLIST AND RETURN WITH THE APPLICATION

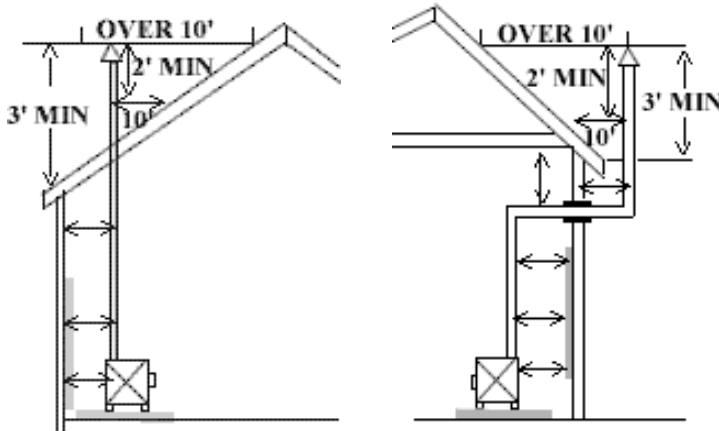
Stove

- A. Fuel _____ New _____ Used _____
- B. Type: Radiant _____ Circulating _____
- C. Manufacturer _____ Lab. No. _____
- D. Name or Model No. _____ Flue Collar size _____
- E. Dimensions: Height _____ Length _____ Width _____

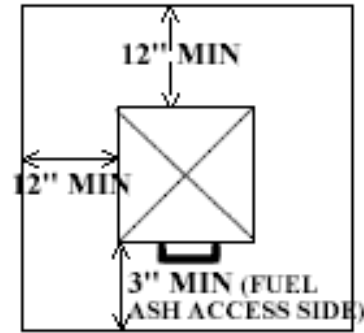
Chimney or Vent

- A. New _____ Existing _____
- B. Flue Size(s) (flue area) _____
- C. Type
Masonry _____ Flue liner _____
Prefab _____ (Manufacturer's name) _____ type _____
- D. Height (refer to diagrams or installation instructions) _____ cap _____
- E. Are other appliances attached to flue (Number and collar sizes) _____

CHIMNEY HEIGHT



HEARTH

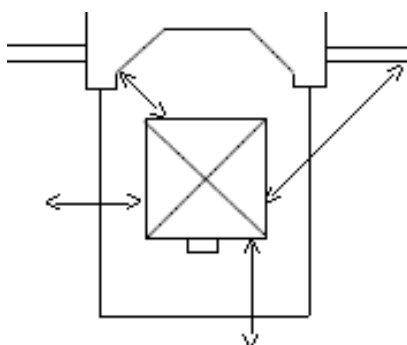


Hearth (non-combustible)

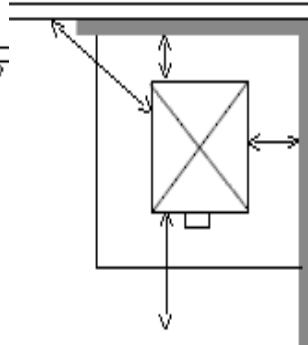
- A. Materials _____
- B. Sub-floor construction _____
- C. Minimum dimensions (refer to diagram)
Front _____ Side(s) _____ Rear _____

Clearances and Wall Protection (see stove installation clearances chart)

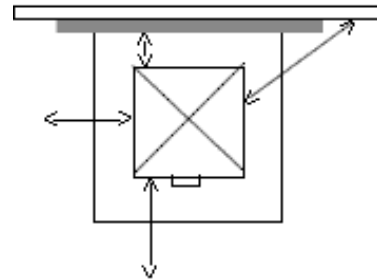
- A. Type of wall protection provided _____
- B. Clearances (refer to diagrams)
Front _____ Side(s) left _____, right _____ Rear _____



FIREPLACE



CORNER



WALL/CENTER