

# TOWN OF BERKLEY

1 North Main Street  
Berkley, MA 02779  
508-8249286

## STOVE PERMIT APPLICATION

Application must be accompanied by copies of license(s) and proof of liability and workmen's compensation insurance.

OFFICE USE ONLY	Permit #: _____	Fee: _____
	Approved <input type="checkbox"/>	Rejected <input type="checkbox"/>
	Inspector's Signature _____	Date _____

Owner: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_

Installer: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Construction Supervisor License: \_\_\_\_\_ Solid Fuel License: \_\_\_\_\_

Estimated cost of stove(s) including installation: \_\_\_\_\_

### STOVE INFORMATION

STOVE TYPE:  Radiant  Circulating  Wood  Coal  Both  Pellet

New:  Lab #: \_\_\_\_\_ UL#: \_\_\_\_\_ Test Date: \_\_\_\_\_

Used:  Lab #: \_\_\_\_\_ UL#: \_\_\_\_\_ Test Date: \_\_\_\_\_

Model #: \_\_\_\_\_ Mfg #: \_\_\_\_\_

CHIMNEY TYPE:  Masonry  Lined  Unlined  Insulated Metal

PLEASE SUPPLY THE MANUFACTURER'S INSTALLATION HANDBOOK FOR INSULATED METAL CHIMNEY WITH THIS APPLICATION.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

STOVE CANNOT BE USED WITHOUT BEING INSPECTED

10/4/2010