

APPLICATION FOR INSTALLATION AND INSPECTION OF SOLID FUEL BURNING APPLIANCE

NOTE: Solid Fuel Burning Appliances must be installed to meet the requirements of the Massachusetts State Building Code, 780 CMR Section 6007

Address: _____ Northborough, MA Map # _____ Parcel # _____

| | |
|--|---|
| Location; Room in which installed: _____ | |
| Type of Fuel: <input type="checkbox"/> Wood | <input type="checkbox"/> Coal <input type="checkbox"/> Pellet <input type="checkbox"/> Other _____ |
| Type of Stove: <input type="checkbox"/> Freestanding | <input type="checkbox"/> Insert <input type="checkbox"/> Other _____ <input type="checkbox"/> New <input type="checkbox"/> Used |
| Manufacturer: _____ | Model: _____ Serial #: _____ |
| Testing Lab: _____ | Cost: \$ _____ |

| | |
|---|----------------------|
| Owner of property: _____ <i>Please print</i> | Telephone No.: _____ |
| Address: _____ | |
| Signature of Owner: _____ | Date: _____ |

| | |
|--|----------------------|
| Applicant: _____ <i>Please print Owner / installer (circle one)</i> | Telephone No.: _____ |
| Mailing Address: _____ <i>Street Town State ZipCode</i> | |
| Signature of Applicant: _____ | Date: _____ |

If the homeowner has hired a contractor to install the appliance, regulations require that the installer must have a Construction Supervisors License (CSL) and a Home Improvement Contractor Registration (HICR). If the contractor does not have these certifications, the homeowner must be the applicant. Please provide us with the applicable information below.

| | | | | |
|------------------|----------------|------|---|--|
| Installer | Name: _____ | | Phone #: _____ | |
| | Address: _____ | | | |
| CSL # | Exp. Date / / | -or- | <input type="checkbox"/> Homeowner's exemption (attached) | |
| HICR # | Exp. Date / / | -or- | <input type="checkbox"/> Homeowner's exemption (attached) | |

(Below this line for Building Department use only)

To Install; Approval by Building Department:

| | | |
|----------------------------|-------|----------------------|
| _____ | _____ | Permit Fee: \$ _____ |
| William S. Farnsworth, Jr. | Date | |
| Inspector of Buildings | | Permit No: BP-_____ |

Inspection; Approval by Building Department:

The appliance as state above and installation thereof conforms to the requirements of the State Building Code, 780 CMR 6007 Solid Fuel-Burning Appliance.

| | |
|-----------|-------|
| _____ | _____ |
| Inspector | Date |

Town of Northborough Building Department 63 Main Street, Northborough, MA 01532 Phone: 508-393-5010