



# TOWN OF DUXBURY

INSPECTIONAL SERVICES DEPARTMENT  
TOWN OFFICES  
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## APPLICATION FOR A STOVE PERMIT

DATE: \_\_\_\_\_

PERMIT: \_\_\_\_\_

FEE: \_\_\_\_\_

VOUCHER: \_\_\_\_\_

NAME OF OWNER \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

ADDRESS \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

NAME OF INSTALLER: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

APPLICANT'S SIGNATURE \_\_\_\_\_

MAKE: \_\_\_\_\_

LOCATION: (ROOM) \_\_\_\_\_

FLOOR MATERIAL: \_\_\_\_\_ WALL: \_\_\_\_\_ CEILING: \_\_\_\_\_

CLEARANCE FLOOR: \_\_\_\_\_ WALL: \_\_\_\_\_ CEILING: \_\_\_\_\_

CHIMNEY: \_\_\_\_\_ BLOCK: \_\_\_\_\_ BRICK: \_\_\_\_\_ METAL: \_\_\_\_\_

FLUE TYPE: \_\_\_\_\_ SIZE: \_\_\_\_\_

**Note:** 3610.6.10 Multiple Flue Connections and 3610.6.10.1 Multiple Flue Connections not allowed: Liquid and gas fuel burning devices may **not** be vented into a flue of a working fireplace or solid fuel burning appliance. One and Two Family Dwelling Code, The Commonwealth of Massachusetts.

THE BUILDING PERMIT AND INSTALLATION INSPECTION ARE LIMITED TO THE STOVE INSTALLATION AND NOT TO THE STOVE CONSTRUCTION OR ITS OPERATION OR TO THE CONDITION OF THE CHIMNEY.

IF THERE ARE ANY CHANGES MADE IN THE INSTALLATION OF THIS APPLIANCE AFTER INSPECTION IS MADE, THIS PERMIT BECOMES NULL AND VOID.

**Note:** It is recommended that chimneys connected to solid fuel burning appliances be cleaned at least once a year.

APPROVED \_\_\_\_\_ DATE \_\_\_\_\_