

WOODBURNING STOVE CERTIFICATION FORM

Photographs Must Be Submitted Showing Stove Unit & Inside and Outside Venting

Form must be inspected and signed by a licensed contractor or member of local Fire Department when stove is NOT Factory installed or commercially installed by an appliance distributor or a licensed expert.	
DATE INSTALLED:	INSTALLED BY:
MAKE/NAME:	UNIT IS LOCATED WHERE IN THE DWELLING?
TYPE : <input type="checkbox"/> Radiant <input type="checkbox"/> Other <input type="checkbox"/> Circulating _____	TYPE(S) OF FUEL USED? <input type="checkbox"/> Wood <input type="checkbox"/> Paper <input type="checkbox"/> Com <input type="checkbox"/> Trash <input type="checkbox"/> Other FREQUENCY OF USE: <input type="checkbox"/> Daily <input type="checkbox"/> 2-3 times weekly <input type="checkbox"/> Seldom <input type="checkbox"/> Rarely
UNIT USED AS: <input type="checkbox"/> Primary Heat Source <input type="checkbox"/> Supplemental Heat Source <input type="checkbox"/> Other (Specify)	
CHIMNEY & STOVEPIPE CLEANED BY: <input type="checkbox"/> Self <input type="checkbox"/> Contractor	
HOW OFTEN? <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Ann. <input type="checkbox"/> Annual <input type="checkbox"/> _____	
IS UNIT U.L. APPROVED? <input type="checkbox"/> Yes <input type="checkbox"/> No	EQUIPPED WITH DAMPER: <input type="checkbox"/> Manual <input type="checkbox"/> Automatic <input type="checkbox"/> Unit <input type="checkbox"/> Stovepipe <input type="checkbox"/> None
HAS HEAT RECLAIMING DEVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO	SMOKE DETECTOR IN ROOM? <input type="checkbox"/> YES <input type="checkbox"/> NO FIRE EXTINGUISHER? <input type="checkbox"/> YES <input type="checkbox"/> NO
CONDITION: <input type="checkbox"/> Whitish Discoloration <input type="checkbox"/> Rust <input type="checkbox"/> Cracks in Weld <input type="checkbox"/> Warping (Check One) <input type="checkbox"/> Unit <input type="checkbox"/> Stovepipe (Check if applicable) <input type="checkbox"/> Corrosion <input type="checkbox"/> Dents <input type="checkbox"/> Creosote Build Up <input type="checkbox"/> Both <input type="checkbox"/> None	

INSTALLATION INFORMATION

This portion MUST BE FULLY COMPLETED AND SIGNED

1. _____ Inches – Side of Unit to nearest wall
2. _____ Inches – Rear of Unit to wall
3. _____ Inches – Top of Stovepipe to ceiling
4. _____ Inches – Bottom of Unit to floor
5. _____ Inches – Front of Unit front edge of floor protection
6. _____ Inches – Size of stovepipe and number of elbows _____
7. _____ Inches – Size of thimble of roof joist shield
8. In the absence of any Manufacturer's minimum clearance standards, please indicate any type(s) of protection materials used to reduce NFPA Standards for clearance on the following:

WALLS surrounding unit & stovepipe are made of and/or covered with combustible materials. Yes No
 WALLS utilized a shield to protect and reduce clearances. Yes No

Shield constructed of: 3 ½" thick masonry (brick)
 3 ½" thick masonry (brick) with air space
 24 gage sheet metal over 1" glass/mineral (insulation with air space)
 Prefabricated wall protector
 Shield's air space is a minimum of 1" and free-flowing with no restrictions
 Other (describe) _____

CEILING above unit & stovepipe is made of and/or covered with combustible materials Yes No
 CEILING utilizes a shield to protect and reduce clearance. Yes No

CEILING shielded by: ½" thick noncombustible insulation board over 1" glass/mineral insulation)
 ½" thick noncombustible insulation board with air space
 24 gage sheet metal with air space
 24 gage sheet metal over 1" glass/mineral (insulation with air space)
 Shield's air space is a minimum of 1" and free-flowing with no restrictions
 Other (describe) _____

Describe floor protection: _____

Applicant's Signature:	Date:
Inspector's Signature:	Date: