

TOWN OF REHOBOTH  
Commonwealth of Massachusetts

SOLID FUEL BURNING STOVE APPLICATION

Property owner: \_\_\_\_\_  
Applicant \_\_\_\_\_  
Address \_\_\_\_\_ Town \_\_\_\_\_ State \_\_\_\_\_  
ZC \_\_\_\_\_ Phone \_\_\_\_\_  
Installation Address \_\_\_\_\_  
Application Date \_\_\_\_\_

Contractor if applicable

Name \_\_\_\_\_  
Address \_\_\_\_\_ Town \_\_\_\_\_ State \_\_\_\_\_  
Const. Supervisors License number \_\_\_\_\_  
Home Improvement Registration number \_\_\_\_\_

Value of stove and installation \_\_\_\_\_

Location of stove within structure \_\_\_\_\_  
Type of wall construction around appliance \_\_\_\_\_  
Type of ceiling construction above appliance \_\_\_\_\_  
Type of floor construction below appliance \_\_\_\_\_  
Give the following distances from the appliance to  
1. Ceiling \_\_\_\_\_  
2. Walls \_\_\_\_\_  
3. Floors \_\_\_\_\_  
Distance of protected floor beyond stove \_\_\_\_\_  
Is a heat shield used \_\_\_\_\_  
Type of Material used: \_\_\_\_\_  
Amount of air space between shield and wall \_\_\_\_\_  
Type of stove:  
Circulating or radiant \_\_\_\_\_  
Type of chimney or venting system:  
Masonry or factory built \_\_\_\_\_  
If factory built: UL rating \_\_\_\_\_ Required clearance from  
combustibles \_\_\_\_\_ Name of Mfg. \_\_\_\_\_  
Internal or external chimney \_\_\_\_\_  
Connector pipe size and type \_\_\_\_\_  
Number of bends in connector pipe \_\_\_\_\_  
Distance of connector pipe to combustibles \_\_\_\_\_  
Size of chimney flue \_\_\_\_\_  
Are any other appliances connected to the same flue \_\_\_\_\_  
If yes, describe fully \_\_\_\_\_

Signature of applicant \_\_\_\_\_  
Signature of owner \_\_\_\_\_  
(Drawn plan and elevation views on back of application)