TOWN OF SCHROON

Zoning / Building / Fire Codes Department

P.O. Box 578
Schroon Lake, N.Y. 12870

Application for Fuel Burning Appliances and Chimneys

Applicable to solid fuel, vented gas, and other appliances

DATE:_____ PERMIT No._____

Application is hereby made to the Building & Codes Department for the issuance of a Building and Use Permit pursuant to the New York State Fire Prevention and Building Code. The applicant or owner agrees to comply with all applicable laws, ordinances, regulations, and all conditions that are part of these requirements and also will allow all inspectors to enter their premises to perform required inspections.

NOTE to applicant: **Rough-in and Final Inspections are required.**

APPLICANT INFORMATION	FUEL BURNING APPLIANCE INFORMATION
Name:	Circle appropriate words
Address 1:	Stove: Wood Coal Pellet Gas
Address 2:	Fireplace insert:
City, State, Zip:	Fireplace, Factory-built: Wood Gas
Phone:	Fireplace, Masonry: Wood Gas
Owner Name:	Furnace: Wood Gas Oil
Address 1:	If Non-masonry appliance, provide:
Address 2:	Manufacturer Name:
City, State, Zip:	Model No.
Phone:	Chimney Information
Exact Address of Construction or Installation:	Circle appropriate words
	Masonry: Block Brick Stone
	Flue: Tile Steel Size (inches)
	Factory Built
	Manufacturer Name:
	Model No.
	Listed By: Number:
NOTE: Construction/ Installation must conform to	Indicate Chimney material
NYS Fire Prevention & Building Codes.	Double wall Triple wall
	Insulated Direct venting
	Liner
Owner Signature:	Inspector Signature: