



Town of Plymouth
Department of Inspectional Services
11 Lincoln Street
Plymouth, Massachusetts 02360
508-747-1620

Application # _____

Building Permit # _____

Fee: \$40.00 _____

SOLID FUEL BURNING APPLICATION

(This form must be filled out in its entirety)

Owner: _____

Address: _____ Parcel #: _____

Make and Model of Stove: _____

Type of Fuel: Wood: _____ Coal: _____ Pellet: _____ Other: _____

Installed In: Year Round Dwelling: _____ Summer Dwelling: _____ Other: _____

Floor Material Under Stove: _____ LOCATION: Floor: (1ST, 2ND) _____

Wall Material Behind Stove: _____ Which Room: _____

Ceiling Material Above Stove: _____

Clearance Between Bottom of Stove and Floor: _____

Clearance Between Back of Stove and Wall: _____

Clearance Between Top of Stove and Ceiling: _____

The Chimney is Constructed of: Brick: _____ Block: _____ Metal: _____

What Type of Flue do You Have?: Clay: _____ Metal: _____ None: _____

What is the Size of the Flue?: _____

What Size is the Metal Pipe Going From the Stove into the Chimney Flue?: _____

Are There Any Other Appliances Connected to This Flue?: Yes: _____ No: _____

According to the state building code, a testing laboratory, approved by the state must approve your stove.

Indicate below which laboratory tested your stove.

_____ *U.L.# _____

**This can be found on the nameplate in the back of the stove, or in the stove's brochure.*

Estimated Cost:** _____ Telephone # _____

Signature of Owner: _____

Mailing Address: _____

🔑 Used Stoves without a U.L. Listing tag may not be approved. Please inquire at office prior to installation.**