



FUEL BURNING APPLIANCE & CHIMNEY APPLICATION

742 Bay Road, Queensbury, NY 12804
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Office Use Only

Permit #: _____

Permit Fee: \$ _____

Invoice #: _____

****ONE APPLICATION PER APPLIANCE****

Project Location: _____ **Tax Map ID #:** _____

Room of Install: _____ **Planned Install Date:** _____

FUEL BURNING APPLIANCE INFORMATION:

TYPE OF DEVICE:

___ Stove ___ Fireplace Insert ___ Fireplace

___ Fuel Fired Equipment (Garage Only: 18" clearance per IMC 304.3)

___ Fireplace, factory built**

(**Manufacturer's name: _____ Model #: _____)

SOURCE OF HEAT:

___ Wood ___ Coal ___ Pellet ___ Gas

CHIMNEY INFORMATION:

___ Masonry (**require plans to be submitted**):

___ block ___ brick ___ stone

___ Flue:

___ tile ___ steel ___ size, in inches

___ Material*:

___ double-wall ___ triple-wall ___ insulated

(*Manufacturer's name: _____ Model #: _____)

CONTACT INFORMATION: PLEASE PRINT LEGIBLY OR TYPE, PLEASE INCLUDE AN EMAIL

• **Applicant:**

Name(s): _____
Mailing Address, C/S/Z: _____
Cell Phone: _(_____) _____ Land Line: _(_____) _____
Email: _____

• **Primary Owner(s):**

Name(s): _____
Mailing Address, C/S/Z: _____
Cell Phone: _(_____) _____ Land Line: _(_____) _____
Email: _____

Check if all work will be performed by property owner only

• **Installer/Builder:** Workers' Comp documentation must be submitted **with this application**

Contact Name(s): _____
Contractor Trade: _____
Mailing Address, C/S/Z: _____
Cell Phone: _(_____) _____ Land Line: _(_____) _____
Email: _____

Contact Person for any questions regarding this project: _____
Cell Phone: _(_____) _____ Land Line: _(_____) _____
Email: _____

ADDITIONAL INFORMATION:

1. **Two (2)** inspections are required. A rough-in inspection, prior to installation and a final inspection, after installation.
2. Manufacturer's installation manual must be available at the time of inspection.
3. Masonry fireplaces & chimneys **require** plans to be submitted.
4. **Twenty-four (24) hour notification is required for inspections.**
5. **Workers' Comp insurance information is required with this application.**

Declaration: Construction/installation must conform to NYS Fire Prevention & Building Code and/or manufacturer requirements. 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 the inspector to enter the premises to perform the required inspections.

I have read and agree to the above:

PRINT NAME: _____

SIGNATURE: _____ DATE: _____