

**TOWN OF WARWICK
WOODSTOVE, CHIMNEY PERMIT APPLICATION**

Location of Project: _____ Map ___ Block ___ Lot ___

Property Owner: _____

Type of Structure Res. Comc.

Street Address: _____

Fee: _____ **Permit #** _____

Date: _____

Contractors Name: _____

CSL# _____ **Exp.** _____

Street Address: _____

HIC# _____ **Exp.** _____

Est. Cost \$ _____

Circle appropriate choice(s) and explain:

WOODSTOVE: **New** **Existing**

Type: Radiant Circulating Manufacturer _____

Model Name/Number _____ Test Label # _____

Dimensions: Height _____ Lenth _____ Width _____ Collar Size _____

CHIMNEY: **New** **Existing**

Type: Masonary Lined Unlined Flue Liner Material _____

 Metal Manufacturer _____ Model _____

Flue Size _____ Other appliances attached to flue _____ Combined area of all _____

Brief description of
work: _____

Inspector of Buildings **Date:** _____

Signature of Applicant **Date:** _____