## TOWN OF CLIFTON PARK SARATOGA COUNTY, NEW YORK

518-371-6702 Fax 518-383-2668

## APPLICATION FOR HEAT PRODUCING EQUIPMENT

Date	Permit No	
APPLICATION IS HEREBY MADE for the issuance Building Code for the installation of a solid fuel burnin agrees to comply with all applicable laws, ordinances, for the required inspections.	ng appliance, chimney or flue as herein	described. The applicant or own
	Applicant must list manufacturer and model number for each appliance being installed.	
Applicant's Name		
Address	( ) E: 1	( ) Fireplace Insert
Zip	( ) Woodstove or Gas Stove	_
Phone	() Gas Logs – Vented	•
Owner's Name		
Address		
Zip		
Phone	( ) Furnace	( ) Boiler
Address of Construction	Model:	
COPY OF MANUFACTURER'S SPECIFICATIONS REQUIRED FOR FACTORY BUILT APPLIANCES AND	( ) Water Heater  Manufacturer:  Model:  Location:	
CHIMNEYS. MUST BE INSTALLED	FUEL TYPE:	
ACCORDING TO SPECIFICATIONS. COPY	( ) Wood ( ) Natur	ral Gas ( ) LPG
OF CONSTRUCTION DETAIL REQUIRED		ric ( ) Other
FOR MASONRY FIREPLACES AND	* Conversion from oil to gas?	( ) Yes ( ) No
CHIMNEYS.		
	Signature of Owner, Applicant or Agent	
The application of	ed (refused) for the construction, recons	is struction or alteration of a
Dated		Authorized Signature