



# TOWN OF WRENTHAM

BUILDING DEPARTMENT · 350 TAUNTON STREET · WRENTHAM, MA 02093  
Tel. 508-384-5421 · Fax. 508-384-6553 · Email jnaff@wrentham.ma.us

## APPLICATION TO INSTALL A SOLID FUEL BURNING APPLIANCE

John G. Naff, CBO  
Building Commissioner  
Zoning Enforcement Officer

DATE: \_\_\_\_\_ FEE: \$50.00 PERMIT #: \_\_\_\_\_  
Check #/ Cash \_\_\_\_\_

I (Applicant): \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Homeowner's Email Address: \_\_\_\_\_ **\*REQUIRED\***

hereby request a permit to install a solid fuel burning appliance in the Town of Wrentham

**at the property located at:** \_\_\_\_\_

The building is, or will be occupied as: Single Fam. \_\_\_\_\_ Two Fam. \_\_\_\_\_ Multi \_\_\_\_\_

Floor and room where appliance is located: \_\_\_\_\_

Type/ Make of Heating Appliance: \_\_\_\_\_ UL# \_\_\_\_\_

Remarks: \_\_\_\_\_

Installer / Company: \_\_\_\_\_ Lic# \_\_\_\_\_ HIC# \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**\*\*Copy of booklet or manual must be included with this application\*\***

**AN INSPECTION IS REQUIRED AFTER INSTALLATION.**

*I HEREBY AGREE TO CONFORM TO THE REQUIREMENTS OF THE MASSACHUSETTS  
STATE BUILDING CODE, AND THE MANUFACTURERS INSTALLATION  
INSTRUCTIONS FOR THE APPLIANCE BEING INSTALLED.*

Contractor Signature: \_\_\_\_\_ Date \_\_\_\_\_

Homeowner Signature: \_\_\_\_\_ Date \_\_\_\_\_

Approval Date: \_\_\_\_\_ By: \_\_\_\_\_  
Building/Mechanical Inspector

