

CHIMNEY VERIFICATION FOR REPLACEMENT OF FUEL-FIRED EQUIPMENT

BLOCK LOT	_ QUALIFIC	ATION CODE		PERMIT #	
WORK SITE ADDRESS					
Owner in Fee	-11111				
Verifying Individual		Company ————			
Address					
Street		City		State	Zip Code
Tel: ()		Fax: ()			
Check the Appropriate Box(es): Type of Replacement:	Existing	Vent/Chimney: Size			
Oil to Gas Conversion Gas to Oil Conversion Gas Appliance Replacement Oil to Oil Replacement Other	[] " [] F [] F	B" Label Vent [L" Label Vent [Flexible Liner [Flewer Vent/Exhauster [[]]]]	Chimney-Interior Chimney-Exterior Masonry Chimr Masonry Chimr Other	or ney-Tile Lined ney-Unlined
Туре		l Type		BTU Rating (input/hour)	
Appliance 1:					
Appliance 2:					
Appliance 3:			_		
If a chimney liner is being installe		INEY LINER ation on the liner must ac	comn	any the Permit a	nnlication
Manufacturer:					
Material of Liner: Stainless Steel		Aluminum	_		
Size of Appliance Vent:	Size of Li	ner:	Heig	ght of Chimney: _	
Length of Connector:	Vent Cor	nnector Rise:			
How does the appliance vent? [] Natural Draft	[] Fan-assisted	[] Other:	
PLEASE SIGN OF	NE OF THE FOL	LOWING VERIFICATIO	N ST	ATEMENTS	
For Oil or Coal to Gas Conversions					
I have verified that the chimney/vent if from its previous use serving an oil or sized for the appliance(s) being install	coal appliance.				
Calculation and applications (c) acting includes.		Signature		Date	
Oil to Oil or Gas to Gas Replacemen	nts or New/Add	litional Appliances:			
I have verified that the existing chimne chimney/vent is appropriately lined an	y/vent is in good	repair and clear of obstru			hat the existing
Direct Vent Appliance:		Signature		Date	
I hereby verify that the appliance(s) be vent is appropriately lined and sized for			rther	verify that the ex	isting chimney
Verification Not Submitted:		Signature Date			
I choose not to submit verification. I ur reinstall the chimney vent connector.	nderstand that I		sent f	or the inspection	to remove and
		Signature		Date	
FOR MINOR AND EMERGENCY W	ORK THIS FO	RM MUST BE PROVIDE	-D W	ITH YOUR PER	MIT APPLICA

All applicable information requested on this form must be supplied.

This form may not be submitted by a homeowner in lieu of the required inspection.

TION. FOR ALL OTHER WORK, THIS FORM MUST BE PRESENTED TO THE CODE OFFICIAL PRIOR TO FINAL

INSPECTION.