

CHIMNEY VERIFICATION FOR REPLACEMENT OF FUEL-FIRED EQUIPMENT

BLOCK LOT	QUALIFICATION CODE	PERMIT#
WORK SITE ADDRESS		
Owner in Fee		
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 	[] "B" Label Vent [] [] "L" Label Vent [] [] Flexible Liner [] [] Power Vent/Exhauster [] [] Fuel Type []	Chimney-Exterior Masonry Chimney-Tile Lined Masonry Chimney-Unlined
Type	Oil / Gas / Other:	
1	Oil / Gas / Other:	
1.	Oil / Gas / Other:	
Appliance o.	CHIMNEY LINER	
If a chimney liner is being installed	l, all documentation on the liner must accon	npany the Permit application.
Manufacturer:	Model: U	L Listing:
Material of Liner: Stainless Steel	Aluminum	
Size of Appliance Vent:	Size of Liner: He	eight of Chimney:
Length of Connector:	Vent Connector Rise:	
How does the appliance vent? [] Natural Draft [] Fan-assisted [] Other:
PLEASE SIGN ONI For Oil or Coal to Gas Conversions:	E OF THE FOLLOWING VERIFICATION S	TATEMENTS
I have verified that the chimney/vent is	in good repair and clear of obstruction and oal appliance. I have verified that the chimn ad.	
	Signature	Date
Oil to Oil or Gas to Gas Replacement	ts or New/Additional Appliances:	
	/vent is in good repair and clear of obstruction I sized for the appliance(s) being installed a	
Direct Vent Appliance:	Signature	Date
I hereby verify that the appliance(s) beir vent is appropriately lined and sized for	ng installed is a direct vent appliance. I furthe any remaining appliances.	er verify that the existing chimney/
Verification Not Submitted:	Signature	Date
I choose not to submit verification. I uncreinstall the chimney vent connector.	derstand that I will be required to be presen	t for the inspection to remove and
	Signature	Date
FOR ALL OTHER WORK, THIS FORM TION.	RK, THIS FORM MUST BE PROVIDED V MUST BE PRESENTED TO THE CODE (e information requested on this form must b	OFFICIAL PRIOR TO FINAL INSPEC-
, oppou		F F

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

U.C.C. F370 (rev. 01/12)