



Solid Fuel Burning Appliance Information Supplement

9921-100 Street, Box 420, Sexsmith, AB T0H 3C0

Phone: 780-568-0215 Fax: 780-568-2200

www.sexsmith.ca/assistcao@sexsmith.ca

Permit Number: **PRBD**

Roll Number: _____

The following information is to **accompany** the **Building Permit Application**. This form is to be used for all solid fuel burning appliances, including wood and coal.

Type of Appliance: ☐ Wood Stove ☐ Airtight Wood Stove ☐ Fireplace ☐ Pellet Stove
☐ Fireplace Insert ☐ Other _____

Chimney: ☐ New or ☐ Used - **Application cannot be accepted.**

Appliance

Specifications: Make: _____ Model: _____

- The appliance is ☐ New or ☐ Used
- If **used**, is there a certification label listing clearances?
☐ Yes or ☐ No - **Application cannot be accepted.**
- Are manufacturer's instructions available?
☐ Yes - **Please submit a copy with permit application or ensure that a copy is available for the inspector upon completion.**
☐ No
- Is the appliance **ULC** or **Warnock-Hershey** Approved? ☐ Yes or ☐ No
- How will combustion air be supplied?
☐ Ducted to the unit directly
☐ Other (please explain) _____
- Appliance will be installed:
☐ In a home
☐ In a mobile home
☐ Other _____
- If installed in a **mobile home** - is the appliance certified for installation in a mobile home?
☐ Yes
☐ No