



## CHIMNEY VERIFICATION FOR REPLACEMENT OF FUEL-FIRED EQUIPMENT

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

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 \_\_\_\_\_

Type

- ☐ "B" Label Vent  
☐ "L" Label Vent  
☐ Flexible Liner  
☐ Power Vent/Exhauster

Fuel Type

- ☐ Chimney-Interior  
☐ Chimney-Exterior  
☐ Masonry Chimney-Tile Lined  
☐ Masonry Chimney-Unlined  
☐ Other \_\_\_\_\_

BTU Rating (input/hour)

Appliance 1: \_\_\_\_\_ Oil / Gas / Solid: \_\_\_\_\_

Appliance 2: \_\_\_\_\_ Oil / Gas / Solid: \_\_\_\_\_

Appliance 3: \_\_\_\_\_ Oil / Gas / Solid: \_\_\_\_\_

### CHIMNEY LINER

If a chimney liner is being installed, all documentation on the liner must accompany the Permit application.

Manufacturer: \_\_\_\_\_ Model: \_\_\_\_\_ UL Listing: \_\_\_\_\_

Material of Liner: Stainless Steel ☐ Aluminum ☐

Size of Appliance Vent: \_\_\_\_\_ Size of Liner: \_\_\_\_\_ Height of Chimney: \_\_\_\_\_

Length of Connector: \_\_\_\_\_ Vent Connector Rise: \_\_\_\_\_

How does the appliance vent? ☐ Natural Draft ☐ Fan-assisted ☐ Other: \_\_\_\_\_

### PLEASE CHECK OFF ONE OF THE FOLLOWING VERIFICATION STATEMENTS AND SIGN BELOW

(No verification required for direct vent to direct vent appliance replacement)

☐ For Liquid or Solid Fuel to Gas Conversions and Liquid or Gas Replacements or New/Additional Appliances:

I have verified that the chimney/vent is in good repair and clear of obstruction and, when applicable, is substantially clean of residue from its previous use serving a liquid or solid fuel appliance. I have verified that the chimney/vent is appropriately lined and sized for the appliance(s) being installed.

☐ Solid Fuel Appliance or Fireplace:

I have verified that the chimney/vent is in good repair and clear of obstruction and, where applicable, is substantially clean of residue from its previous use serving a liquid or solid fuel appliance. I have verified that the chimney/vent is appropriately lined and sized for the appliance(s) being installed.

☐ Direct Vent Appliance:

I hereby verify that the appliance(s) being installed is a direct vent appliance. I further verify that the existing chimney/vent is appropriately lined and sized for any remaining appliances.

☐ Verification Not Submitted:

I choose not to submit verification. I understand that I will be required to be present for the inspection to remove and reinstall the chimney vent connector.

Signature

Date

FOR MINOR AND EMERGENCY WORK, THIS FORM MUST BE PROVIDED WITH YOUR PERMIT APPLICATION. FOR ALL OTHER WORK (FULL PERMIT), THIS FORM MUST BE PRESENTED TO THE CODE OFFICIAL PRIOR TO FINAL INSPECTION.