



Town of Mount Hope

Building Department
1706 Route 211 West
Otisville, NY 10963
(845) 386-9949

Permit # _____

Solid Fuel Burning Appliance Permit Application

Date: _____ Section: _____ Block: _____ Lot: _____

Name: _____ Phone #: _____

Address: _____

Answer the following questions that apply.

Fireplace: Masonry _____ or Factory Built _____

Wood/Pellet stove make and model: _____

Outdoor Wood Burning Stove: _____

Chimney size: Masonry: _____ Factory Built: _____

Room Appliance installed in: _____

Cost of project: _____

All appliances must be installed in accordance with manufacturer's specifications and or N.Y.S. Uniform Fire Prevention and Building Code.

Literature on the appliance and chimney must be submitted with application showing type, clearance requirements and any other information that this office request.

A Carbon Monoxide detector must be installed on the floor level that appliance is located on **before** the final inspection is requested.

Affidavit of Final Cost of Construction must be submitted before final inspection is requested.

Office use only:

Approved _____ Fee Paid _____

Disapproved: _____ Reason: _____

Building Inspector _____ Date _____

Certificate of Use/Compliance will only be issued *after* the **Affidavit of Final Cost** is notarized and submitted & a **Final Inspection** is completed and approved.