

TOWN OF COLEBROOK

562 Colebrook Road P.O. Box 5
COLEBROOK, CT. 06021

Telephone (860) 379-3359 Fax (860) 379-7215

Required Information for the Issuance of
PERMIT FOR WOOD BURNING STOVES

TYPE OF STOVE: _____

MANUFACTURER: _____

TYPE OF FLOOR UNDER STOVE: _____

TYPE OF WALLS WITHIN 36": _____

TYPE OF CHIMNEY: _____

ROOM IN WHICH STOVE WILL BE INSTALLED: _____

U. L. APPROVED: YES _____ NO _____

BUILDING OFFICIAL APPROVAL: YES _____ NO _____

OWNER SIGNATURE _____

STREET ADDRESS _____

PHONE _____

BUILDING OFFICIAL
PRINT NAME: _____

SIGNATURE: _____

This stove DOES/DOES NOT meet the State Building Code at the time of inspection:
DATE OF INSPECTION: _____
