

Town of Denning

Supervisor: David Brooks

Town Clerk / Tax Collector: Nancy A Parrow

Phone: (845) 985 -2411 Fax: (845) 985-0188



BUILDING & ZONING DEPT.

1567 Denning Road / PO Box 277

Claryville, NY 12725

Website: www.denningny.gov

Code Enforcement Officer: Miguel Martinez Riddle

Phone : (845) 366-9900 / Fax : (845) 985-0188

Email : ceo@denningny.gov

Building Permit Application for: Wood Burning Stove, Fireplace Insert, Gas Fireplace and Stove

Fee \$120

APPLICANT INFORMATION (Please fill out if the applicant is different than the property owner)	
Applicant's name printed (if different from the owner):	
If an LLC provide the name person(s) authorized to sign on behalf of the LLC:	
Address:	
Phone Number:	Email address:
Signature:	
PROPERTY INFORMATION:	
Property owner's name:	
Owners Address (if different than property address):	
Property Address you are applying for:	
Section/Block/Lot (Tax map ID):	Acreage:
Phone Number:	Email address:
Owner Signature:	

DETAILS

Stove Type: _____
Stove Manufacturer: _____
Model Number: _____
Status: New ___ Existing ___
Location of stove or fireplace Insert: _____
Building: Brick ___ Frame ___ Stories ___ Egress ___
Families ___ Type of Heat ___ Fuel ___ Hot Water ___
Date of Installation _____
Person/Company installing _____

USE: ___ Residential ___ Single Family ___ Multi-Family
___ Commercial

Estimated cost: _____

Describe, including measurements:

REQUIREMENTS

- 1) Stove or fireplace insert must be UL listed and installed per manufacturer's instructions including flue and chimney
- 2) Submit a copy of the manufacturer's installation instructions
- 3) Submit floor plan/drawing showing placement of the wood burning stove, fireplace insert or gas fireplace.
- 4) Submit documentation of Liability, Disability and Workers Compensation for company installing the fixture. If being installed by the homeowner, documentation of the homeowner's insurance.
- 5) Submit a zoning permit application
- 6) A final inspection by the building inspector and an electrical inspection certificate (if applicable) is necessary prior to issuing the certificate of occupancy.

I give the Building Department permission to inspect my property:

Signature of Owner _____

Date _____

This application was Approved/Denied by

Signature of the Building Inspector/ CEO _____

Date _____