

**SOLID FUEL BURNING APPLIANCE  
PERMIT APPLICATION**

**PERMIT FEE: \$50.00**

**Property Information:**

Name of Owner: \_\_\_\_\_

Subject Property Address: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Email: \_\_\_\_\_

**Unit Specifications:**

Manufacturer's Name: \_\_\_\_\_ Model: \_\_\_\_\_

Required Clearances: Top: \_\_\_\_\_ Front: \_\_\_\_\_ Sides: \_\_\_\_\_ Rear: \_\_\_\_\_

Testing Agency: \_\_\_\_\_

**Chimney Requirements and Specifications:**

Manufacturer's Name: \_\_\_\_\_

Model: \_\_\_\_\_ Height: \_\_\_\_\_ Size: \_\_\_\_\_

Special Conditions: \_\_\_\_\_

**REQUIREMENTS: Manufacturer's specifications and a copy of the installation instructions with a diagram for the appliance must be submitted to the District of Kitimat Building Department prior to permit issuance.**

**Declaration:**

I/We hereby agree to indemnify and save harmless the District of Kitimat and its employees against all claims, liabilities, judgments, costs and expenses of whatsoever kind which may in any way occur against the District of Kitimat and its employees in consequence of and incidental to, the granting of this permit, if issued, and I further agree to conform to all requirements of the *Kitimat Municipal Code*.

Owner/Authorized Agent's Name (print): \_\_\_\_\_

Owner/Authorized Agent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Building Official's Approval Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**DISTRICT OF KITIMAT USE ONLY:** Permit: # \_\_\_\_\_

Inspection Date: \_\_\_\_\_ Approved:  Yes  No

Building Official's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Deficiency: \_\_\_\_\_

Re-Inspection Required:  Yes  No

Re-Inspection Date: \_\_\_\_\_ Approved:  Yes  No

Building Official's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_