# WOOD/PELLET STOVES

## Building Permit Procedure:

Applicant is given permit application to be filled out and submitted to the Building Department with the fee. ($35.00) Required documentation:

1. Completed building permit application, debris form and required fee.
2. Appliance information:
   a. New appliances-The stove manufacturer's specification sheet with listing information as required by *Section M1303.2* including:
      1. Manufacturer's name and trademark;
      2. Model or identification number of the appliance;
      3. Type(s) of fuel(s) approved;
      4. Testing laboratory's name or trademark and location;
      5. Date tested;
      6. Clearances to combustibles;
         a. Above top
         b. From front
         c. From back
         d. From sides
      7. Floor protection;
      8. National test standard(s);
      9. Label serial number.

   b. Used appliances meeting listing requirements

   c. Used appliances which predate the listing requirements as detailed above. Information is to be submitted describing the appliance including any details in the above list.

   NOTE: *Non-listed appliance installations are to be inspected by a member of the Fire Department and an inspector from this office.*
3. Manufacturer's information or, for used appliances, a sketch showing appliance dimensions is to be submitted.
4. Floor plan and elevations showing proposed location of appliance with proposed clearances and floor protection and stack connection.
5. Confirm that appliance is proposed to be connected properly (sufficient stack size and mechanical fasteners, etc.). NOTE: In general, connection of solid fuel appliance to a flue serving liquid fueled appliance is not allowed. Refer to Section *M1401.63* and Chapter 6-8.2 of NFPA 211.
6. Fee of $35.00 is paid prior to inspection and accompanied by the application when submitted to the Building Department.

# TOWN OF WESTMINSTER

| | | | | | |
|---|---|---|---|---|---|
| NAME OF OWNER | | | | DATE | PERMIT # |
| ADDRESS OF OWNER | | | | TELEPHONE | |
| LOCATION OF PROPERTY<br>NO. STREET | | IF IN A SUBDIVISION - NAME | | | LOT NO. |
| SIDE OF STREET<br>☐ NORTH ☐ SOUTH ☐ EAST ☐ WEST | MAP # | PARCEL # | SIZE OF LOT ☐ SQ. FT. ☐ ACRES | | ZONING |
| PURCHASED PROPERTY FROM | DATE | ARE THERE ANY BODIES OF WATER, STREAMS OR SWAMP AREAS ON OR BUTTING LOT? ☐ YES ☐ NO | | | |
| BUILDER'S NAME | | | | TELEPHONE | |
| BUILDER'S ADDRESS | | | | LICENSE # | HIC # |
| PURPOSE OF NEW BUILDING OR ALTERATION | | | | FLOOR | SQ. FT. AREA |
| IS THERE PLUMBING, HEATING, ELECTRICAL OR SHEET METAL ASSOCIATED WITH THIS CONSTRUCTION? | ☐ PLUMBING ☐ HEATING ☐ ELECTRICAL ☐ SHEET METAL ☐ NONE | | | | |
| OVERALL DIMENSIONS OF BUILDING | NO. OF STORIES | NO. OF ROOMS | NO. OF FAMILY UNITS | IS SEWERAGE SYSTEM TO BE:<br>☐ CONSTRUCTED ☐ REPAIRED ☐ ALTERED | |
| NO. OF BEDROOMS | NO. OF BATHROOMS | NO. OF LAVATORIES | NO. OF GARBAGE DISPOSAL UNITS | WATER SUPPLY<br>☐ TOWN WATER ☐ NEW WELL ☐ EXISTING WELL | |
| TYPE OF CONSTRUCTION | FOUNDATION MATERIAL | | TYPE OF HEATING SYSTEM | | NO. OF FIREPLACES |
| GARAGE<br>☐ ATTACHED ☐ SEPARATE ☐ IN BASEMENT | NO. OF VEHICLES | PERMIT FEE | ESTIMATE OR CONTRACT COST | | |
| APPROVED BY ZONING | DATE | RECEIVED PAYMENT | | | |
| APPROVED BY BOARD OF HEALTH | DATE | Applicant agrees to abide by the Rules and Regulations of the Building, Wiring, Gas and Plumbing Inspectors, Board of Health, Zoning Board, Board of Appeals, Highway and Water Departments, Board of Selectmen, Fire Chief and All applicable town By-Laws. No changes or alterations permitted unless revised plans are submitted and approved.<br><br>X | | | |
| APPROVED BY PLANNING BOARD | DATE | | | | |
| APPROVED BY CONSERVATION COMM | DATE | | | | |
| APPROVED BY FIRE CHIEF | DATE | | | | |
| APPROVED BY HIGHWAY DEPARTMENT | DATE | SIGNATURE OF APPLICANT<br><br>X | | | |
| APPROVED BY BUILDING INSPECTOR | DATE | | | | |
| APPROVED BY TOWN TREASURER | DATE | SIGNATURE OF BUILDER | | | |
| RESTRICTIONS | | | | USE GROUP: | |
| | | | | FIRE GRADING: | |

# TOWN OF WESTMINSTER

MASSACHUSETTS 01473

WESTMINSTER BUILDING DEPARTMENT

**In accordance with the provisions of MGL c 40, S 54, a condition of Building Permit Number _____ is that the debris resulting from this work shall be disposed of in a properly licensed solid waste disposal facility as defined by MGL c 111, S 150A.**

**The debris will be disposed of in:**

_____

**(Location of Facility)**

_____

**Signature of Permit Applicant**

_____

**Date**

**ww:debris**

*The Commonwealth of Massachusetts*
*Department of Industrial Accidents*
*Office of Investigations*
*600 Washington Street*
*Boston, MA 02111*
*www.mass.gov/dia*

# Workers' Compensation Insurance Affidavit: Builders/Contractors/Electricians/Plumbers

**Applicant Information** **Please Print Legibly**

Name (Business/Organization/Individual): _____

Address: _____

City/State/Zip: _____ Phone #: _____

**Are you an employer? Check the appropriate box:**

1. ☐ I am a employer with _____ employees (full and/or part-time).*
2. ☐ I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required.]
3. ☐ I am a homeowner doing all work myself. [No workers' comp. insurance required.] †
4. ☐ I am a general contractor and I have hired the sub-contractors listed on the attached sheet. ‡ These sub-contractors have workers' comp. insurance.
5. ☐ We are a corporation and its officers have exercised their right of exemption per MGL c. 152, §1(4), and we have no employees. [No workers' comp. insurance required.]

**Type of project (required):**

6. ☐ New construction
7. ☐ Remodeling
8. ☐ Demolition
9. ☐ Building addition
10. ☐ Electrical repairs or additions
11. ☐ Plumbing repairs or additions
12. ☐ Roof repairs
13. ☐ Other _____

*Any applicant that checks box #1 must also fill out the section below showing their workers' compensation policy information.
† Homeowners who submit this affidavit indicating they are doing all work and then hire outside contractors must submit a new affidavit indicating such.
‡ Contractors that check this box must attached an additional sheet showing the name of the sub-contractors and their workers' comp. policy information.

***I am an employer that is providing workers' compensation insurance for my employees. Below is the policy and job site information.***

Insurance Company Name: _____

Policy # or Self-ins. Lic. #: _____ Expiration Date: _____

Job Site Address: _____ City/State/Zip: _____

**Attach a copy of the workers' compensation policy declaration page (showing the policy number and expiration date).**

Failure to secure coverage as required under Section 25A of MGL c. 152 can lead to the imposition of criminal penalties of a fine up to $1,500.00 and/or one-year imprisonment, as well as civil penalties in the form of a STOP WORK ORDER and a fine of up to $250.00 a day against the violator. Be advised that a copy of this statement may be forwarded to the Office of Investigations of the DIA for insurance coverage verification.

***I do hereby certify under the pains and penalties of perjury that the information provided above is true and correct.***

Signature: _____ Date: _____

Phone #: _____

*Official use only. Do not write in this area, to be completed by city or town official.*

**City or Town:** _____ **Permit/License #** _____

**Issuing Authority (circle one):**
**1. Board of Health 2. Building Department 3. City/Town Clerk 4. Electrical Inspector 5. Plumbing Inspector**
**6. Other** _____

**Contact Person:** _____ **Phone #:** _____

The Commonwealth of Massachusetts
Board of Building Regulations and Standards
Massachusetts State Building Code, 780 CMR

# Building Permit Application To Construct, Repair, Renovate Or Demolish a *One- or Two-Family Dwelling*

FOR MUNICIPALITY USE
*Revised Mar 2011*

This Section For Official Use Only

Building Permit Number: _____ Date Applied: _____

_____ _____ _____
Building Official (Print Name) Signature Date

## SECTION 1: SITE INFORMATION

**1.1 Property Address:**

1.1a Is this an accepted street? yes____ no____

**1.2 Assessors Map & Parcel Numbers**

Map Number Parcel Number

**1.3 Zoning Information:**

Zoning District Proposed Use

**1.4 Property Dimensions:**

Lot Area (sq ft) Frontage (ft)

**1.5 Building Setbacks (ft)**

| Front Yard | | Side Yards | | Rear Yard | |
|---|---|---|---|---|---|
| Required | Provided | Required | Provided | Required | Provided |
| | | | | | |

**1.6 Water Supply:** (M.G.L c. 40, § 54)
Public ☐ Private ☐

**1.7 Flood Zone Information:**
Zone: ___ Outside Flood Zone? Check if yes☐

**1.8 Sewage Disposal System:**
Municipal ☐ On site disposal system ☐

## SECTION 2: PROPERTY OWNERSHIP[1]

**2.1 Owner[1] of Record:**

Name (Print) City, State, ZIP

No. and Street Telephone Email Address

## SECTION 3: DESCRIPTION OF PROPOSED WORK[2] (check all that apply)

| | | | | | |
|---|---|---|---|---|---|
| New Construction ☐ | Existing Building ☐ | Owner-Occupied ☐ | Repairs(s) ☐ | Alteration(s) ☐ | Addition ☐ |
| Demolition ☐ | Accessory Bldg. ☐ | Number of Units____ | Other ☐ Specify:_____ | | |

Brief Description of Proposed Work[2]:_____

## SECTION 4: ESTIMATED CONSTRUCTION COSTS

| Item | Estimated Costs: (Labor and Materials) | Official Use Only |
|---|---|---|
| 1. Building | $ | 1. Building Permit Fee: $_____ Indicate how fee is determined: |
| 2. Electrical | $ | ☐ Standard City/Town Application Fee |
| 3. Plumbing | $ | ☐ Total Project Cost[3] (Item 6) x multiplier _____ x _____ |
| 4. Mechanical (HVAC) | $ | 2. Other Fees: $_____ |
| 5. Mechanical (Fire Suppression) | $ | List:_____ |
| 6. **Total Project Cost**: | $ | Total All Fees: $_____ |
| | | Check No. _____Check Amount: _____Cash Amount:_____ |
| | | ☐ Paid in Full ☐ Outstanding Balance Due:_____ |

## SECTION 5: CONSTRUCTION SERVICES

**5.1 Construction Supervisor License (CSL)**

Name of CSL Holder

No. and Street

City/Town, State, ZIP

Telephone Email address

License Number Expiration Date

List CSL Type (see below) _____

| Type | Description |
|---|---|
| U | Unrestricted (Buildings up to 35,000 cu. ft.) |
| R | Restricted 1&2 Family Dwelling |
| M | Masonry |
| RC | Roofing Covering |
| WS | Window and Siding |
| SF | Solid Fuel Burning Appliances |
| I | Insulation |
| D | Demolition |

**5.2 Registered Home Improvement Contractor (HIC)**

HIC Company Name or HIC Registrant Name

No. and Street

City/Town, State, ZIP Telephone

HIC Registration Number Expiration Date

Email address

## SECTION 6: WORKERS' COMPENSATION INSURANCE AFFIDAVIT (M.G.L. c. 152. § 25C(6))

Workers Compensation Insurance affidavit must be completed and submitted with this application. Failure to provide this affidavit will result in the denial of the Issuance of the building permit.

Signed Affidavit Attached? Yes ..... ☐ No ..... ☐

## SECTION 7a: OWNER AUTHORIZATION TO BE COMPLETED WHEN OWNER'S AGENT OR CONTRACTOR APPLIES FOR BUILDING PERMIT

I, as Owner of the subject property, hereby authorize_____
to act on my behalf, in all matters relative to work authorized by this building permit application.

Print Owner's Name (Electronic Signature) Date

## SECTION 7b: OWNER[1] OR AUTHORIZED AGENT DECLARATION

By entering my name below, I hereby attest under the pains and penalties of perjury that all of the information contained in this application is true and accurate to the best of my knowledge and understanding.

Print Owner's or Authorized Agent's Name (Electronic Signature) Date

## NOTES:

1. An Owner who obtains a building permit to do his/her own work, or an owner who hires an unregistered contractor (not registered in the Home Improvement Contractor (HIC) Program), will ***not*** have access to the arbitration program or guaranty fund under M.G.L. c. 142A. Other important information on the HIC Program can be found at www.mass.gov/oca Information on the Construction Supervisor License can be found at www.mass.gov/dps

2. When substantial work is planned, provide the information below:
Total floor area (sq. ft.) _____ (including garage, finished basement/attics, decks or porch)
Gross living area (sq. ft.) _____ Habitable room count _____
Number of fireplaces_____ Number of bedrooms _____
Number of bathrooms _____ Number of half/baths _____
Type of heating system _____ Number of decks/ porches _____
Type of cooling system_____ Enclosed _____Open _____

3. "Total Project Square Footage" may be substituted for "Total Project Cost"

TABLE R1003.20
CRICKET DIMENSIONS

| ROOF SLOPE | H |
|---|---|
| 12 - 12 | 1/2 of W |
| 8 - 12 | 1/3 of W |
| 6 - 12 | 1/4 of W |
| 4 - 12 | 1/6 of W |
| 3 - 12 | 1/8 of W |

## SECTION R1004
## FACTORY-BUILT FIREPLACES

**R1004.1 General.** Factory-built fireplaces shall be *listed* and *labeled* and shall be installed in accordance with the conditions of the *listing*. Factory-built fireplaces shall be tested in accordance with UL 127.

**R1004.2 Hearth extensions.** Hearth extensions of *approved* factory-built fireplaces shall be installed in accordance with the *listing* of the fireplace. The hearth extension shall be readily distinguishable from the surrounding floor area.

**R1004.3 Decorative shrouds.** Decorative shrouds shall not be installed at the termination of chimneys for factory-built fireplaces except where the shrouds are listed and *labeled* for use with the specific factory-built fireplace system and installed in accordance with the manufacturer's installation instructions.

**R1004.4 Unvented gas log heaters.** An unvented gas log heater shall not be installed in a factory-built fireplace unless the fireplace system has been specifically tested, *listed* and *labeled* for such use in accordance with UL 127.

## SECTION R1005
## FACTORY-BUILT CHIMNEYS

**R1005.1 Listing.** Factory-built chimneys shall be *listed* and *labeled* and shall be installed and terminated in accordance with the manufacturer's installation instructions.

**R1005.2 Decorative shrouds.** Decorative shrouds shall not be installed at the termination of factory-built chimneys except where the shrouds are *listed* and *labeled* for use with the specific factory-built chimney system and installed in accordance with the manufacturer's installation instructions.

**R1005.3 Solid-fuel appliances.** Factory-built chimneys installed in *dwelling units* with solid-fuel-burning *appliances* shall comply with the Type HT requirements of UL 103 and shall be marked "Type HT and "Residential Type and Building Heating *Appliance* Chimney."

**Exception:** Chimneys for use with open combustion chamber fireplaces shall comply with the requirements of UL 103 and shall be marked "Residential Type and Building Heating *Appliance* Chimney."

Chimneys for use with open combustion chamber *appliances* installed in buildings other than *dwelling units* shall comply with the requirements of UL 103 and shall be marked "Building Heating *Appliance* Chimney" or "Residential Type and Building Heating *Appliance* Chimney."

**R1005.4 Factory-built fireplaces.** Chimneys for use with factory-built fireplaces shall comply with the requirements of UL 127.

**R1005.5 Support.** Where factory-built chimneys are supported by structural members, such as joists and rafters, those members shall be designed to support the additional load.

**R1005.6 Medium-heat appliances.** Factory-built chimneys for medium-heat *appliances* producing flue gases having a temperature above 1,000°F (538°C), measured at the entrance to the chimney shall comply with UL 959.

## SECTION R1006
## EXTERIOR AIR SUPPLY

**R1006.1 Exterior air.** Factory-built or masonry fireplaces covered in this chapter shall be equipped with an exterior air supply to assure proper fuel combustion unless the room is mechanically ventilated and controlled so that the indoor pressure is neutral or positive.

**R1006.1.1 Factory-built fireplaces.** Exterior *combustion air* ducts for factory-built fireplaces shall be a *listed* component of the fireplace and shall be installed according to the fireplace manufacturer's instructions.

**R1006.1.2 Masonry fireplaces.** *Listed combustion air* ducts for masonry fireplaces shall be installed according to the terms of their *listing* and the manufacturer's instructions.

**R1006.2 Exterior air intake.** The exterior air intake shall be capable of supplying all *combustion air* from the exterior of the *dwelling* or from spaces within the *dwelling* ventilated with outside air such as nonmechanically ventilated crawl or *attic* spaces. The exterior air intake shall not be located within the garage or *basement* of the *dwelling* nor shall the air intake be located at an elevation higher than the firebox. The exterior air intake shall be covered with a corrosion-resistant screen of 1/4-inch (6 mm) mesh.

**R1006.3 Clearance.** Unlisted *combustion air* ducts shall be installed with a minimum 1-inch (25 mm) clearance to combustibles for all parts of the duct within 5 feet (1524 mm) of the duct outlet.

**R1006.4 Passageway.** The *combustion air* passageway shall be a minimum of 6 square inches (3870 $mm^2$) and not more than 55 square inches (0.035 $m^2$), except that *combustion air* systems for listed fireplaces shall be constructed according to the fireplace manufacturer's instructions.

**R1006.5 Outlet.** Locating the exterior air outlet in the back or sides of the firebox chamber or within 24 inches (610 mm) of the firebox opening on or near the floor is permitted. The outlet shall be closable and designed to prevent burning material from dropping into concealed combustible spaces.