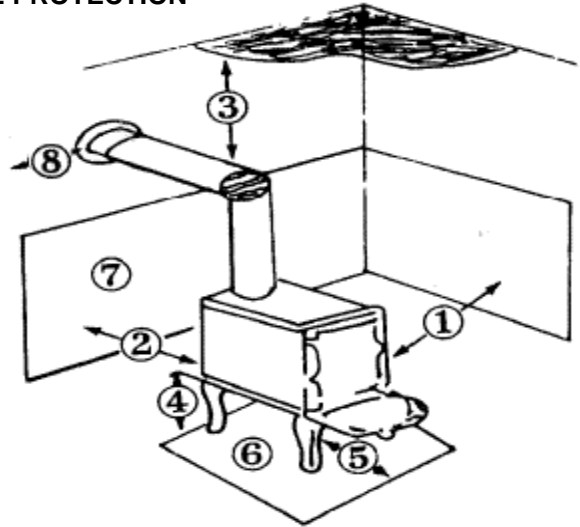


SOLID FUEL BURNING UNIT QUESTIONNAIRE

1. Brand name of stove: _____ Model of stove: _____ Type of unit: airtight non-airtight open
2. Where is stove located? _____
3. In what type of container are ashes stored? _____
4. Stove construction: Cast Iron Steel Sheet Metal Fuel Type used? _____
5. Is stove U.L. approved? Yes No
6. Stove is used for: Primary Heat Auxiliary Heat Occasional Use Cooking
Stove is used approximately _____ days per month.
7. Was wood stove installation part of original home construction? Yes No
Date of installation: _____ Stove installed by owner License Contractor Other
If other, please explain: _____
8. Chimney/stove pipe type: Masonry Metal Single Wall Metal Double Wall Metal Triple Wall
9. Is unit vented into the same chimney flue with a heating device using a different fuel type? Yes No
10. Stove/chimney installation has been inspected and approved by city, borough, or fire department representative?
 Yes No Inspection Date: _____
11. How often is chimney inspected for creosote build-up? _____ By whom? _____
12. How often do you hire professional maintenance and/or cleaning service of your stove and chimney? _____
Date of last service: _____

UNIT CLEARANCE AND FIRE PROTECTION

1. Side of unit to nearest wall is _____ inches.
2. Rear of unit or chimney to wall is _____ inches.
(Whichever is closest).
3. Top of stovepipe to ceiling is _____ inches.
(N/A if stove top passes through ceiling.)
4. Bottom of unit to floor is _____ inches.
5. Front of unit to front edge of pad or floor protection is _____ inches.
6. Protective floor covering material below stove?
 Yes No If yes, please describe: _____
7. Protective wall cover material behind/beside stove?
 Yes No If yes, please describe: _____
8. Is there at least 3 to 4 inches clearance from any combustible or insulation around the chimney pipe? Yes No
9. Do these distances comply with the manufacturer's standards? Yes No
10. Do you have a fire extinguisher? Yes No
11. Do you have smoke alarms? Yes No
12. Is chimney capped year round? Yes No



* A photo of the wood/coal burning unit including the location that the stove pipe passes through the wall or ceiling must be submitted with this questionnaire.

Insured's Signature: _____ Date: _____
IH018 (4/19/13)

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