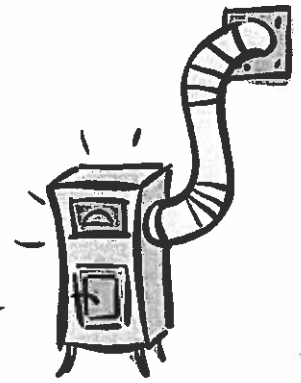


PORT SHELDON TOWNSHIP
 16201 PORTSHELDON RD.
 WEST OLIVE MI 49460 616 399 6121



OUTDOOR WOODBOILER APPLICATION

NAME _____ PHONE _____

ADDRESS _____ ZIP _____

PPN# 70-11- - - INSTALLER _____

ADDRESS _____ PHONE _____

THIS IS A NEW _____ AN EXISTING _____ WOOD BOILER THAT WAS
 INSTALLED IN _____ PERMIT # _____

I CERTIFY THAT THE INFORMATION GIVEN IS TRUE TO THE BEST OF MY
 ABILITY, AND I UNDERSTAND THE RESTRICTION ON THE INSTALLATION AND
 OPERATION OF THIS UNIT. SIGNED OWNER _____

SIGNED CONTRACTOR/OWNER _____

MECHANICAL AND ELECTRICAL & PLUMBING PERMITS ARE ALSO REQUIRED

ADD ADDITIONAL SHEETS AS NEEDED. INCLUDE STOVE INFORMATION

AND SITE INFORMATION AS REQUIRED IN ORDINANCE # 2009/001

INCLUDE \$50.00 INSPECTION FEE PER

STOVE INFORMATION

MAKE _____

MODEL _____

SITE PLAN (INCLUDE NEIGHBORING HOMES)

| | | |
|----------|-----------------------------|----------|
| NEIGHBOR | NEIGHBOR | NEIGHBOR |
| NEI | YOURS □ UNIT HOUSE | NEI |
| | ROAD | |
| NEI | NEI | NEI |