

SOLID FUEL HEATING QUESTIONNAIRE

POLICY NUMBER ▶

• COMPLETE ONE QUESTIONNAIRE PER HEATING UNIT. NOT APPLICABLE TO SOLID MASONRY OPEN FIREPLACES WITHOUT DOORS, ATTACHMENTS OR INSERTS

Insurance Company	Insured	Agent Broker
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Address of premises where unit is installed Principal residence or _____

Location of unit within the dwelling _____

HEATING UNIT

Type (a) Fireplace (with doors) (e) Factory manufactured oil/solid fuel combination unit
 (b) Pot belly, box, franklin or acorn stove (loose fitting doors or no doors) (f) Oil furnace with add-on solid fuel burning unit
 (c) Airtight* stove (g) Other, specify _____
 (d) Airtight* insert in Solid masonry fireplace Zero clearance fireplace * Airtight - tight fitting doors and seams

Fuel Wood only Quantity of wood burned per year _____ Wood and oil Other, specify _____

Make _____ **Model** _____ **Age** _____

Labelled Canadian Standards Association Underwriters' Laboratories of Canada
 Warnock-Hersey Professional Service Ltd. None or other, specify _____

CHIMNEY

Type Masonry - Built from ground Bracket Chimney Lining - Flue tile None or other, specify _____
 Factory built double walled metal chimney - manufacturer _____
 Labelled Canadian Standards Association Underwriters' Laboratories of Canada
 Warnock-Hersey Professional Service Ltd. None or other, specify _____
 Other type of chimney, specify _____
 Unknown

Age Same as heating unit or _____

Does unit share a chimney flue with any other heating unit no yes, explain _____

Chimney is installed Inside building Outside building

How often is chimney cleaned _____ Date of last cleaning _____ (year, month)

INSTALLATION

Was the **heating unit** installed by a heating contractor unknown no yes, name of firm _____

Was the **chimney** installed by a heating or masonry contractor unknown no yes, name of firm _____

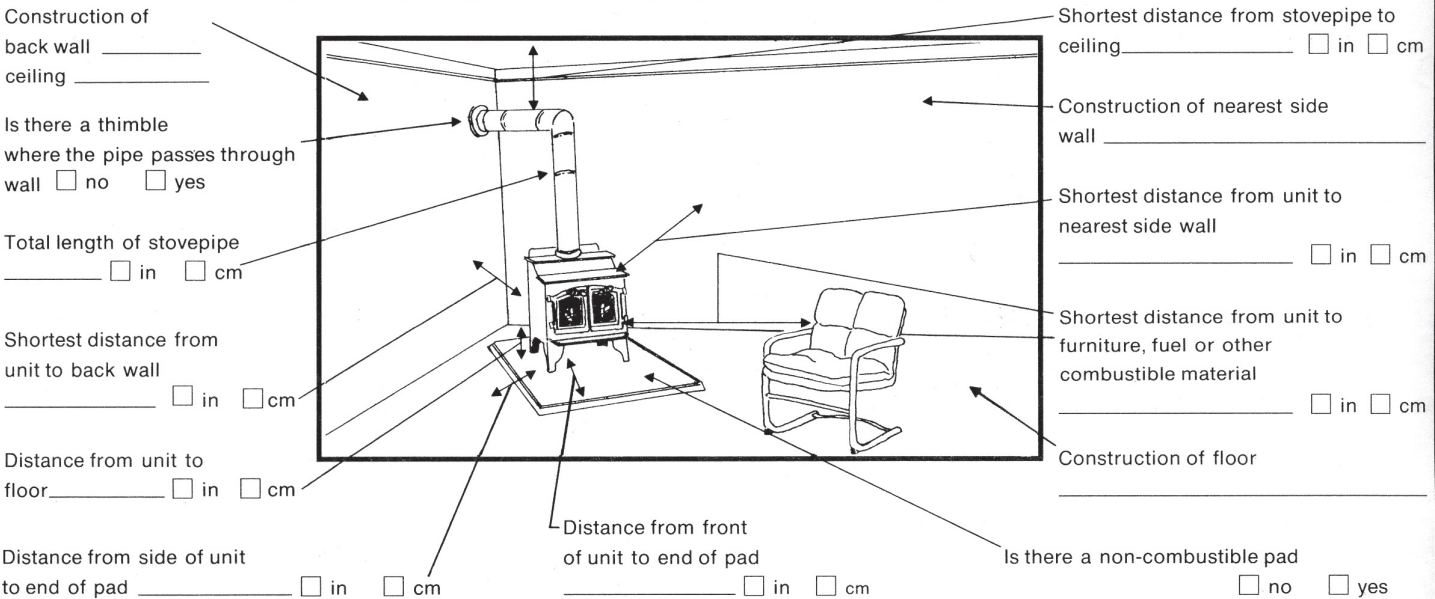
Does the **stovepipe** pass through a concealed space not applicable no yes, explain in Remarks

Is **protective shielding** used around heating unit - if so, describe (material used, clearances, etc.) _____

Has the installation including chimney been inspected and approved by a fire department or building code inspector no yes

DIAGRAM

Please complete the following for heating unit types (b), (c), and (g). If your unit does not fit diagram please feel free to attach your own.



REMARKS

Completed by _____ Date _____ (year, month, day)