

NOTE:

This form can be filled out on-line and signed electronically. The completed form should be e-mailed to David Ford at [ceo@villageofhoneoyefalls.org](mailto:ceo@villageofhoneoyefalls.org).

Alternatively, the form can be printed and mailed to:

David Ford  
Village of Honeoye Falls  
5 East St.  
Honeoye Falls, NY 14472

If you have any questions, please phone David Ford at 624-6150 (office) or 303-4901 (cell).



*Office Use Only*

Date of Application: \_\_\_\_\_

Fee Amount: \_\_\_\_\_

Permit Number: \_\_\_\_\_

## **APPLICATION FOR SOLID FUEL BURNING PERMIT**

**PROPERTY ADDRESS:** \_\_\_\_\_

### **INSTRUCTIONS FOR WOOD STOVE OR FIREPLACE PERMIT APPLICATION**

All solid fuel burning devices (wood stove, fireplace, pellet stove, biomass stove) in the Village of Honeoye Falls requires a Solid Fuel Burning Permit and must be obtained prior to beginning any work.

Applicants must submit a diagram showing the location where the solid fuel burning devise is located.

All applications must be accompanied by a factory specification sheet and installation instructions.

All solid fuel burning devices shall be inspected by the Code Enforcement Officer before being used. It is the applicant's responsibility to call for this inspection.

**PROPERTY OWNER:** \_\_\_\_\_

ADDRESS:

\_\_\_\_\_

TELEPHONE: \_\_\_\_\_ Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

BUSINESS NAME IF APPLICABLE: \_\_\_\_\_

**CONTRACTOR:**

\_\_\_\_\_

ADDRESS:

\_\_\_\_\_

TELEPHONE: \_\_\_\_\_ Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

Worker's Compensation Insurance Received:

**MANUFACTURER:** \_\_\_\_\_ **SERIAL NUMBER:** \_\_\_\_\_

**CERTIFICATION**

I hereby certify that I am the property owner and I am duly authorized to make and file this application; and that all statements contained in this application are true to the best of my knowledge and belief; and that the work will be performed in the manner set forth in this application and the plans and information filed herewith.

Application is hereby made to the Village of Honeoye Falls for the issuance of a Solid Fuel Burning Device Permit, Pursuant to the Zoning Ordinance of the Village of Honeoye Falls and the New York State Building Code governing the demolition of buildings as herein described. The applicant agrees to comply with all applicable laws, ordinances and regulations.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Make checks payable to: Village of Honeoye Falls Mail or deliver to: 5 East Street, Honeoye Falls, NY 14472

**SOLID FUEL BURNING PERMIT** ( ☐ ) Approved ( ☐ ) Denied Date: \_\_\_\_\_ By: \_\_\_\_\_  
Code Enforcement Officer