



Millville Board of Health
8 Central Street
Millville, MA 01529
508-883-5041

Fee Amount: \$100.00

Permit No.: _____

Date Issued: _____

OUTDOOR WOOD BURNING FURNACE PERMIT

Application is hereby made for a permit to construct and maintain an outdoor wood burning furnace.

Applicant: _____ Telephone No.: _____

Street Address: _____

Please attach a site plan, prepared by a Registered Civil Engineer indicating the proposed location of the furnace in relation to other buildings on your property and all neighboring houses within 500 feet. Include distances from all buildings, roads adjacent to the site, and distances from furnace to woods, brush and flammable structures.

Dimensions of the furnace boiler structure: _____

Proposed height of the smokestack: _____

Name of Unit Manufacturer: _____

I have reviewed and understand the manufacturer's installation and operating instructions of the unit.

Signature _____ Date _____

I have received a copy of the Board of Health Regulations for Outdoor Wood Burning Furnaces.

Signature _____ Date _____

If requested by the Board of Health, you must provide proof of a primary heat source.

Board of Health Construction Permit Approval

Sign-off from electrical and building inspectors must be submitted **before** BOH approval is given.

Electrical Inspector: _____ Date: _____

Building Inspector: _____ Date: _____

Board of Health: _____ Date: _____

Board of Health Approval for Operation

An inspection must be done and a BOH signature obtained before unit is put to use.

Board of Health: _____ Date: _____