

**APPLICATION FOR  
INSTALLATION OF SOLID FUEL BURNING APPLIANCE  
(WOOD, PELLET, COAL AND OTHER)  
WORTHINGTON, MA**

**\*Location of work (Street and Number):** \_\_\_\_\_

**\*Installing:** \_\_\_ Wood Stove \_\_\_ Pellet Stove \_\_\_ Coal Stove \_\_\_ OTHER (please describe) \_\_\_\_\_  
**Stove Manufacturer's Name or Trademark:** \_\_\_\_\_ **Model name (or ID number):** \_\_\_\_\_

**Describe location of installation (which room?):** \_\_\_\_\_

**\*OWNER'S NAME:** \_\_\_\_\_ **\*Phone #1:** \_\_\_\_\_ **\*Phone #2:** \_\_\_\_\_

**\*Owner's MAILING address:** \_\_\_\_\_ **\*Zip:** \_\_\_\_\_

**\*IF THE STOVE IS BEING INSTALLED ANYWHERE OTHER THAN AN OWNER-OCCUPIED RESIDENCE, A CONSTRUCTION SUPERVISORS LICENSE IS REQUIRED.**

**\*IF THERE IS NO GENERAL CONTRACTOR HIRED TO INSTALL YOUR STOVE (IN AN OWNER-OCCUPIED RESIDENCE), PLEASE SKIP THE CONTRACTOR'S INFO SECTION AND READ/SIGN THE "HOMEOWNER'S LICENCE EXEMPTION" (on back of page). ALSO, COMPLETE "WORKERS' COMPENSATION INSURANCE AFFIDAVIT" (see attached page).**

**\*CONTRACTOR'S NAME:** \_\_\_\_\_ **\*Phone #1:** \_\_\_\_\_ **\*Phone #2:** \_\_\_\_\_

**\*Contractor's MAILING address:** \_\_\_\_\_ **\*Zip:** \_\_\_\_\_

**→ Photocopy of contractor's Mass. C. S. License and HIC registration must be included with each application (THEY ARE NOT KEPT 'ON FILE')**

**\*Construction Supervisor's License (CSL) #:** \_\_\_\_\_ **\*Expiration Date:** \_\_\_\_\_

**\*List CSL Type (see choices below):** \_\_\_\_\_

TYPE	DESCRIPTION
U	Unrestricted (up to 35,000 Cu.Ft)
R	Restricted 1&2 Family Dwelling
M	Masonry Only
RC	Residential Roofing Covering
WS	Residential Window and Siding
SF	Residential Solid Fuel Burning Appliance Installation
D	Residential Demolition

**\*Home Improvement Contractor (HIC) registration #:** \_\_\_\_\_ **\*Expiration Date:** \_\_\_\_\_

---

The undersigned certifies that the above statements are true to the best of his/her knowledge and belief, and that all work performed will comply with local zoning bylaws and the Massachusetts State Building Code. Signatures of an Owner AND Contractor below shall indicate that the Owner authorizes the Contractor to act as his/her agent in all matters concerning this permit.

**\*REQUIRED** - OWNER'S SIGNATURE: \_\_\_\_\_ Date \_\_\_\_\_  
CONTRACTOR'S SIGNATURE: \_\_\_\_\_ Date \_\_\_\_\_

---

### **HOMEOWNER LICENSE EXEMPTION**

(Required when applicant is NOT a licensed contractor)

**DEFINITION OF A HOMEOWNER:**

Person(s) who own a parcel of land on which he/she resides or will reside, on which there is, or is intended to be, a one to three family dwelling, attached or detached structures accessory to such use and/or farm structures. A person who constructs more than one home in a two-year period shall not be considered a homeowner. Such homeowner shall submit to the Building Commissioner on this form that he/she shall be responsible for all such work performed under the building permit.

As acting Construction Supervisor, your presence on the job site shall be required from time to time, during and upon completion of the work for which the permit is issued.

Also be advised that with reference to GL Chapter 152 (Workers' Compensation) and Chapter 153 (Liability of Employers to Employees Laws Annotated), you may be liable for persons you hire to perform work for you under this permit.

As Owner who obtains a building permit to do his/her own work, or an owner who hires an unregistered contractor (not registered in the Home Improvement Contractor (HIC) Program), will not have access to the arbitration program or guaranty fund under M.G.L. c.142A. Other important information on the HIC Program and Construction Supervisor Licensing (CSL) can be found in 780 CMR Regulation 110.R6 and 110.R5, respectively.

---

The undersigned certifies that he/she qualifies as a Homeowner as defined above, and assumes responsibility for compliance with the Massachusetts State Building Code, state and local zoning laws, and Massachusetts General Laws Annotated.

\_\_\_\_\_  
Signature of Homeowner

### **PLEASE RETURN TO:**

**Worthington Building Commissioner**

**PO BOX 247**

**Worthington, MA 01098**

If you have any questions, please call 530-721-7571

**FOR OFFICE USE ONLY:**

PERMIT #: \_\_\_\_\_

Assessors' Map/Parcel: \_\_\_\_\_ / \_\_\_\_\_

Construction Type: \_\_\_\_\_

Zoning Dist: \_\_\_\_\_

Use Group: \_\_\_\_\_