

Zero Clearance Installation

CUSTOMER _____ SALESPERSON _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

1. FUEL: WOOD _____ GAS DV _____ GAS BV _____ LP _____ NG _____

2. STOVE MFG/MODEL _____

3. PROJECT TYPE: NEW CONSTRUCTION _____ REMODEL _____ ADDITION _____

4. ARE YOU PURCHASING MANTEL/CABINET Y N (IF YES), CURRENT FLOORING _____
 IF YES, BE SURE TO REMOVE RADIATORS AND KICKBOARDS (WE WILL REMOVE KICKBOARDS FOR A FEE)

5. ARE YOU RAISING THE FIREPLACE OFF THE FLOOR? IF YES, HOW MUCH _____

6. HOW ARE YOU GOING TO FINISH AROUND THE FIREPLACE? _____ THICKNESS? _____

7. WHAT TYPE OF HEARTH IS GOING TO BE IN FRONT? _____ THICKNESS? _____

8. WHAT IS YOUR "DOG HOUSE" SOFFIT MADE OF: (IF APPLICABLE) _____

9. TYPE OF SIDING: WOOD VINYL METAL

IF GAS PLEASE PROVIDE THE CONTACT INFO FOR YOUR PLUMBER/GAS CO. _____

Chase Height: _____ Chase Size: _____

Diagram (1) Framing Required For: (UNIT _____)

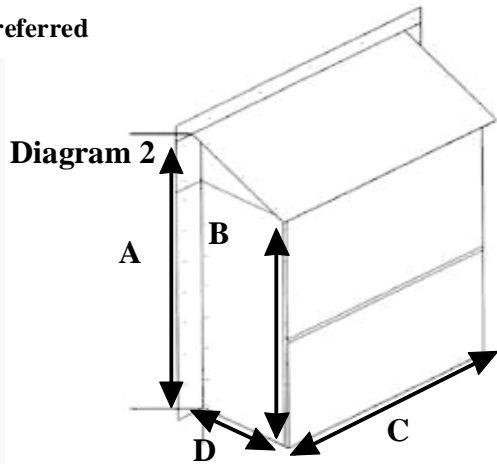
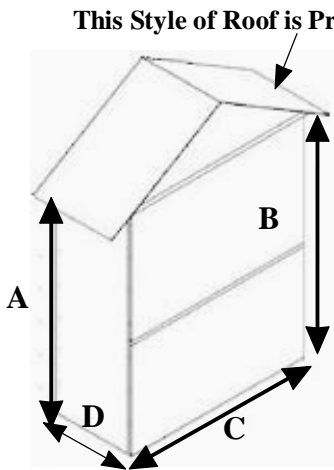
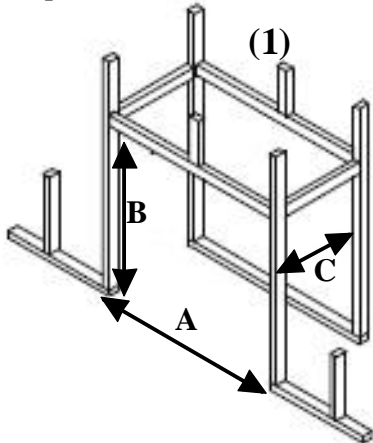
A= _____
 B= _____
 C= _____

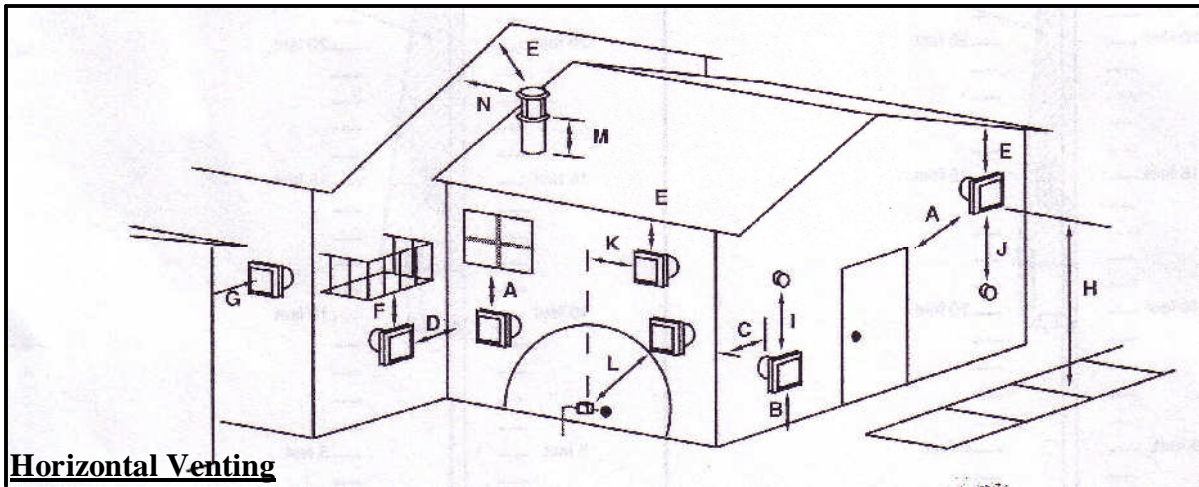
Dog House: Y _____ N _____

Diagram 2 (Dog House Dimensions to Be Taken From Inside)

A (Inside Height From Where Unit is Sitting)= _____
 B (Inside Height #2)= _____
 C (Width)= _____
 D (Depth)= _____

- PLEASE TELL YOUR BUILDER : IN ORDER FOR US TO DO INSTALLATION WE WILL NEED TO HAVE ACCESS ON ALL SIDES OF FRAMING.
- BE SURE TO HAVE YOUR PLUMBER/GAS COMPANY PREPARED TO RUN ALL GAS LINES AND MAKE ALL CONNECTIONS (WE ARE NOT LICENSED)
- BE SURE TO HAVE YOUR ELECTRICIAN PREPARED TO RUN ALL LINES AND MAKE ALL CONNECTIONS (WE ARE NOT LICENSED)





Horizontal Venting

- A- Distance to A window or Door _____
- B- Distance Above Grade _____
- C- Distance to Outside Corner _____
- D- Distance to Inside Corner _____
- E- Distance to Overhang _____ (FROM FLOOR WHERE UNIT IS SITTING TO BOTTOM OF SOFFIT)
- F- Distance Under a Deck, Veranda or Balcony _____
- G- Distance to an Adjacent Building _____
- H- Distance above a Public Sidewalk or Walkway _____
- I- Distance to any Mechanical Supply Inlet _____
- J- Distance to any Non-Mechanical Supply Inlet _____
- K- Distance above a Meter/Regulator area _____
- L- Distance from the Meter/Regulator _____
- N- Horizontal Distance to an Adjacent Surface from the Vertical Cap _____
 Through Foundation? Y N If Yes, How far above the Ground? _____

Vertical Venting:

- House Height: 1Story _____ 2 Story _____ 3 Story _____
- Roof Material: Shingle _____ Rolled _____ Metal _____ Slate _____ Rubber _____
- Ceiling Type: Flat Drop _____ Sheet Rock _____ Cathedral _____ Wood _____
- Roof Pitch: 3/12 _____ 4/12 _____ 5/12 _____ 6/12 _____ 7/12 _____ 8/12 _____
- How many floors to go through? _____
- How far apart are the joists? _____

These measurements are a guide to help us formulate an estimate for materials to be used in the installation. You will be billed only for labor and materials used. Please see your salesperson for a written quote which will provide you with the estimated costs of the installation.

Signature _____ Date _____