

- THE CINCINNATI INSURANCE COMPANY**
- THE CINCINNATI CASUALTY COMPANY**
- THE CINCINNATI INDEMNITY COMPANY**

## WOODBURNING OR OTHER SOLID FUEL STOVE QUESTIONNAIRE

1. Who installed the unit? \_\_\_\_\_
  2. Is it a:
 

Woodburning Stove (freestanding)	_____	Yes	_____	No
Fireplace Insert	_____	Yes	_____	No
Furnace Modification or Add-On	_____	Yes	_____	No
  3. What type of fuel is used? \_\_\_\_\_
  4. Is the unit UL approved? \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Don't Know
  5. Is this unit the primary heat source for the dwelling? \_\_\_\_\_ Yes \_\_\_\_\_ No
  6. Is the unit thermostatically controlled? \_\_\_\_\_ Yes \_\_\_\_\_ No
  7. The following conditions are requirements:
    - A. Flue pipes must be kept three times the pipe diameter away from combustibles.
    - B. Wall: Stove must be placed at least 36" from combustible wall or furnishings or at least 18" from non-combustible shield with 1" air space to combustible wall.
    - C. Floor: A noncombustible surface below the stove must extend at least 24" beyond the door and 12" beyond the side and rear of the stove. If the stove has 6" high legs, this surface must consist of 2" of solid masonry with a pad of 24-gauge sheet metal on top or bottom of the masonry. If the legs are only 2" to 6" high, there must be at least 4" of hollow masonry with ends unsealed and joints matched to provide free airflow. Stoves with less than 2" legs cannot be put on combustible floors regardless of protection.
    - D. Ceiling: There must be at least 18" between the top of the unit or stovepipe and the ceiling.
    - E. A metal container with tight fitting lid must be available for ash disposal.
    - F. The thimble collar or opening must be noncombustible and at least three times the diameter of the stovepipe.
    - G. Installation of a minimum of one smoke detector per woodburning unit. The detector must be located on the same floor as the stove.
- Are all of these requirements met? \_\_\_\_\_ Yes \_\_\_\_\_ No If not, explain \_\_\_\_\_

Is the stove, chimney, or stovepipe inspected and cleaned each year? \_\_\_\_\_ Yes \_\_\_\_\_ No  
By whom: \_\_\_\_\_

NOTE: Our agent may be asked to verify that the unit and its components have been cleaned annually.  
Will you provide this information (verbal or written) if requested? \_\_\_\_\_ Yes \_\_\_\_\_ No

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

Agency: \_\_\_\_\_

Policy No: \_\_\_\_\_

