

# SUPPLEMENTAL HEATING QUESTIONNAIRE

The supplemental heating questionnaire is to be completed when the dwelling is heated by Wood or Coal and or a Monitor Heater.

Named Insured : \_\_\_\_\_ Agency Name: \_\_\_\_\_

Policy #: \_\_\_\_\_ Location: \_\_\_\_\_

## Wood/Coal Burning Stove Information

Manufacturer: \_\_\_\_\_ Model: \_\_\_\_\_ Year Built: \_\_\_\_\_

Who did the installation? Current Owner ☐ Previous Owner ☐ Professional ☐ Unknown ☐

Did a Fire or Building Inspector approve this installation of the stove? Yes ☐ No ☐

Is the stove installed on a noncombustible surface that extends at least 6 inches from the sides and back and at least 18 inches in front of the stove where the fuel is loaded? Yes ☐ No ☐

Is the stove located at least 36 inches from any combustible wall, furniture, curtains, wood storage, or any other combustible material? Yes ☐ No ☐

If no, please describe the noncombustible protective materials used and the distance from the nearest wall or object to the rear, left or right of the stove. \_\_\_\_\_

Is the stovepipe the same size diameter for it's entire length between the stove and chimney? Yes ☐ No ☐

Is there at least 18 inches between the stovepipe and the ceiling or other combustive materials? Yes ☐ No ☐

Does the stovepipe pass through a combustible wall? Yes ☐ No ☐

If yes, is there a double walled insulated thimble installed where the stovepipe passes through a combustible wall into the chimney? Yes ☐ No ☐

If the stove is installed in a mobile home, is the stove "Mobile Home Approved?" Yes ☐ No ☐

How Long have you burned wood or coal? \_\_\_\_\_

What percentage of your heating needs is derived from supplemental heating? 0-10% ☐ 11-25% ☐  
26-50% ☐ Over 50% ☐

How many cords of wood are used each year? \_\_\_\_\_

## Chimney Information

Type of Chimney used: Tiled/Steel Lined Brick ☐ Unlined single brick ☐ Metal insulated ☐  
Tiled/Steel Lined Cement Block ☐ Unlined double brick ☐

What is the age of the chimney? \_\_\_\_\_

How often is the chimney cleaned? \_\_\_\_\_

Who performs the cleaning service? \_\_\_\_\_

Is the wood stove connected to the same flue that is also connected to a gas or oil furnace or other heating device? Yes ☐ No ☐

## Monitor Heater Information

Type of Heater Installed \_\_\_\_\_ Model # \_\_\_\_\_

Installed by \_\_\_\_\_ Is the installer Manufacturer Certified? Yes ☐ No ☐

Is the heater vented to outside? Yes ☐ No ☐ Fuel source location? \_\_\_\_\_ External tank ☐ Portable ☐

**MAINE FRAUD WARNING: IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE, OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES MAY INCLUDE IMPRISONMENT, FINES, OR A DENIAL OF INSURANCE BENEFITS.**

\_\_\_\_\_  
INSURED'S SIGNATURE

\_\_\_\_\_  
DATE