

Supplemental Heating Application



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The Agent Agency

1. Insured: _____ Policy Number (if available): _____

PLEASE ANSWER THE QUESTIONNAIRE IF A SPACE HEATING STOVE/FIREPLACE HAS BEEN INSTALLED IN THE MOBILE HOME OR DWELLING

- 2. Is the stove/fireplace free of large cracks or broken parts? Yes No
 - 3. Is stove/fireplace located on non-combustible floor material? Yes No
 - 4. Does floor protection extend at least 18" from the opening of the stove/fireplace and 6" from the sides? Yes No
 - 5. Is stove/fireplace spaced at least 36" from any combustible material? Yes No
 - 6. Does pipe go through sidewall? If it does, is there at least 18" between the top of pipe and ceiling? Yes No
 - 7. Does pipe fit snugly into thimble? Yes No
 - 8. Is pipe routed so as not to pass through closets or a concealed space? Yes No
 - 9. Does stove/fireplace have an automatic draft regulator or built-in damper? Yes No
 - 10. Does stove pipe enter fireplace chimney?
If so, does it enter horizontally at a point higher than outlet of stove firebox? Yes No
 - 11. Was stove/fireplace professionally installed? Yes No
 - 12. Was stove/fireplace factory installed? Yes No
 - 13. Manufactured Year: _____
 - 14. Installation Date: _____
 - 15. Last Date Serviced/Cleaned: _____ By Whom: _____
- Please attach or email a photo of the heating unit.

*Explain all "No" answers below.

Signature of Applicant: _____ Date: _____

