



Town of Irricana  
Box 100  
Irricana, AB T0M 1B0  
Ph. 403-935-4672 Fax 403-935-4270

**Solid Fuel Burning Appliance Information**  
(please complete as much information as possible and submit with the building permit application)

1. Applicant's Name: \_\_\_\_\_
2. Municipality: \_\_\_\_\_
3. Legal Land Description Lot \_\_\_\_\_ Block \_\_\_\_\_ Plan \_\_\_\_\_  
\_\_\_\_\_ ¼ Sec \_\_\_\_\_ Twp \_\_\_\_\_ Rge \_\_\_\_\_ W of \_\_\_\_\_ Meridian
4. In the solid fuel burning appliance ULC, Warnock Hersey or CSA approved? \_\_\_\_\_
5. Please fill in the information as indicated on the diagram below

