



**North Coast Unified
Air Quality Management District**
707 L Street, Eureka, CA 95501
(707) 443-3093
www.ncuaqmd.org



**Woodsmoke Reduction Pilot Program
In-home Estimate & Proof of Old Device Eligibility**

Applicant Name (Resident):	Phone:
Physical Address (include City, State and zip code):	
Installer Name:	

Existing Wood Burning Device

Make:	Model:	Year Manufactured/Age:
Type: <input type="checkbox"/> Freestanding Wood Stove <input type="checkbox"/> Wood Burning Insert <input type="checkbox"/> Open Hearth Fireplace*		
*Open hearth Fireplace Only Is the brickwork and/or chimney structurally sound? <input type="checkbox"/>Yes <input type="checkbox"/>No		
Will your installation estimate include additional labor and/or supplies to make the brickwork and/or chimney structurally sound? <input type="checkbox"/>Yes <input type="checkbox"/>No		
Does sufficient evidence exist that this is used as a primary source of heat? <input type="checkbox"/>Yes <input type="checkbox"/>No		
Is the old device currently in working condition? <input type="checkbox"/>Yes <input type="checkbox"/>No		
Is the old device one of the following? <input type="checkbox"/> Wood stoves/inserts where the manufacturer and model are not listed on the U.S. EPA current ¹ and historical ² list of certified wood heaters. <input type="checkbox"/> Wood stoves/inserts installed prior to 1988		

¹ Current list of U.S. EPA certified wood heaters: <https://www.epa.gov/compliance/list-epa-certified-wood-stoves>

² Historical list of U.S. EPA certified wood heaters: <https://www.epa.gov/compliance/historical-list-epa-certified-wood-heaters>

Additional information identifying age and/or non-EPA Certification status (attach additional pages if necessary):

Color Photograph Attached

Installation Estimate, please attach itemized bid

New Device Type: <input type="checkbox"/> Freestanding Wood Stove <input type="checkbox"/> Wood Burning Insert <input type="checkbox"/> Pellet Stove <input type="checkbox"/> Pellet Insert	<input type="checkbox"/> Gas/Propane Insert <input type="checkbox"/> Gas/Propane Stove	<input type="checkbox"/> Electric Heat Pump <input type="checkbox"/> Electric Stove <input type="checkbox"/> Electric Insert
Does the applicant have properly functioning smoke and carbon monoxide detectors? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If no, please include the purchase and installation of these devices in your installation quote.		

I certify that the information contained on this form is accurate and the form is completely filled out. The old device listed above is used as a primary heat source and is not EPA Certified. I possess the proper licensing requirements to supply installation of the new heating device listed in the attached Vendor estimate.

Printed Name

Date

Signature

