

FIREPLACE
Measurement Form

202 Main Street Deep River, CT • Phone: (860) 526-9567

DATE: _____

PLEASE INCLUDE (3) DIGITAL PICTURES: CLOSEUP OF FIREPLACE OPENING, BROADER VIEW OF FIREPLACE, AND EXTERIOR CHIMNEY

NAME: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

EMAIL: _____ CELL: _____

CHIMNEY DAMPER

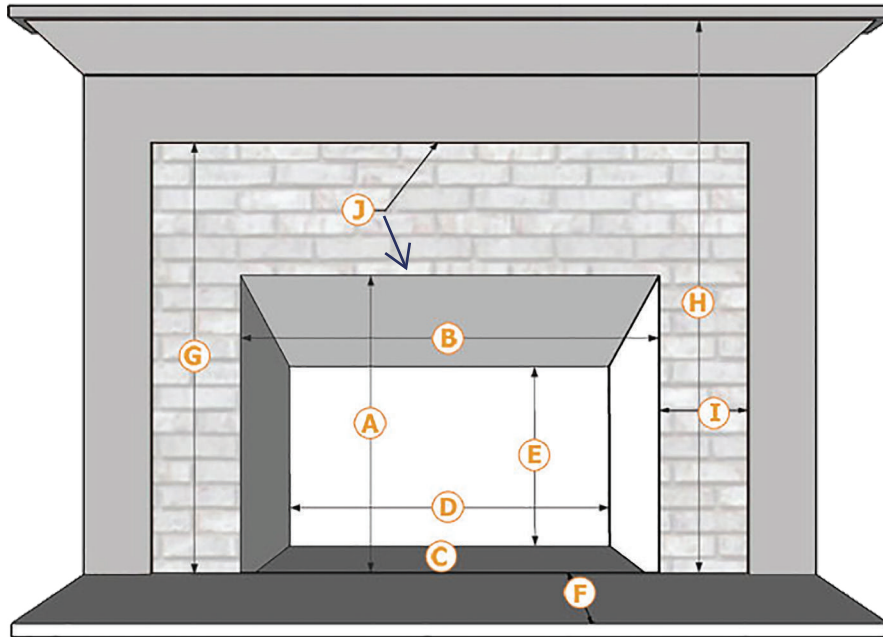
DEPTH: _____

WIDTH: _____

CHIMNEY HEIGHT:

CHIMNEY CAP:

YES ___ NO ___



HEARTH TO CEILING
 HEIGHT:

(A) FIREPLACE HEIGHT _____

(F) HEARTH DEPTH _____

(B) FIREPLACE WIDTH _____

(G) MANTEL WOOD TRIM _____

(C) FIREPLACE DEPTH - FLOOR _____

(H) BOTTOM OF MANTEL SHELF _____

(C) FIREPLACE DEPTH @ 24" _____

(I) LEFT/RIGHT MANTEL TRIM L _____ R _____

(D) BACKWALL WIDTH _____

(J) TOP OF OPENING TO TRIM _____

(E) BACKWALL HEIGHT _____

ASH DUMP YES _____ OR NO _____

FUEL TYPE: ___ WOOD, ___ NATURAL GAS, ___ PROPANE GAS, ___ ELECTRIC, ___ PELLET

Additional Notes: