

Alaska Department of Environmental Conservation
Division of Air Quality



Solid Fuel Burning Device Registration

Device Owner Name: _____

Device Owner Email (if available): _____

Device Installation address:

Date of planned or actual installation at above location: _____
(month/year)

Device Type: (check one)

- ☐ Wood Stove
- ☐ Pellet Stove
- ☐ Pellet Hydronic Heater
- ☐ Other (_____)

Reason for Registration (check one)

- ☐ Sale of new Device
- ☐ Real Estate Transaction
- ☐ Compliance Related
- ☐ Burn Right Program
- ☐ Voluntary
- ☐ Other (_____)

Manufacturer: _____

(The manufacturer of the device may be found on the device (label or plaque) or in the owner's manual.)

Model: _____

(The model of the device may be found on the device (label or plaque) or in the owner's manual.)

Serial Number: _____

(The Serial Number of the device may be found on the device (label or plaque) or in the owner's manual.)

Year Manufactured: _____

(The Year the device was manufactured may be found on the device label. If unknown, write unknown.)

Emission Rating of Device: _____ GPH/MMBTU (circle one-information on plaque)

Registration Submitted by: ☐ Owner, ☐ Other

Name (if other selected): _____ **Date:** _____

Submit this form to the Department of Environmental Conservation Division of Air Quality, 610 University Avenue, Fairbanks, AK 99709 Attention Steven Hoke. Alternatively it may be submitted by email to steven.hoke@alaska.gov. For more information call (907)451-5172.