



## 2022 ASH CAN PROGRAM APPLICATION FORM

### Contact Information

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/Zip Code: \_\_\_\_\_

Are you Property Owner? Yes \_\_\_ No \_\_\_

Daytime Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

### Heating Appliance Information

Type of heating appliance in your home

Wood Burning Stove? Yes \_\_\_ No \_\_\_

Wood Burning Fireplace? Yes \_\_\_ No \_\_\_

Wood Burning pellet Stove? Yes \_\_\_ No \_\_\_