

Building Permit Application for any Building other than a One- or Two-Family Dwelling

(This Section For Official Use Only)

Building Permit Number: _____	Date Applied: _____	Building Official: _____		
Application Number: _____	Fees: _____	Payments: _____	Check # : _____	Date Paid: _____

SECTION 1: LOCATION (Please indicate Block # and Lot # for locations for which a street address is not available)

No.	Street	Unit	City/Town	Zip Code	Parcel ID	Zone	Name of Building
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SECTION 2: PROPOSED WORK (Check only one. This is required.) *

<input type="radio"/> New Commercial	<input type="radio"/> New Industrial	<input type="radio"/> New Apartment/Condo	<input type="radio"/> Demolition (Please fill out and submit Appendix 1)	
<input type="radio"/> Signs	<input type="radio"/> Alteration/Addition/Repair	<input type="radio"/> Pool (above ground)	<input type="radio"/> Pool (in ground)	<input type="radio"/> Siding/Windows/Roof

Other: _____

Are building plans and/or construction documents being supplied as part of this permit application? Yes No

Is an Independent Structural Engineering Peer Review required? Yes No

Is an existing building analysis required? Yes No

Brief Description of Proposed Work: *

SECTION 3 - COMPLETE THIS SECTION IF EXISTING BUILDING UNDERGOING RENOVATION, ADDITION, OR CHANGE IN USE OR OCCUPANCY

Check here if an Existing Building Evaluation is enclosed (See IEBC)

Existing Use Group(s): _____	Proposed Use Group(s): _____
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Check as applicable (at least one is required) *

<input type="checkbox"/> Repairs 402	<input type="checkbox"/> Alteration 403 Level 1	<input type="checkbox"/> Alteration 404 Level 2	<input type="checkbox"/> Alteration 405 Level 3
<input type="checkbox"/> Change of Occupancy 406	<input type="checkbox"/> Additions 407	<input type="checkbox"/> Historic Buildings 408	<input type="checkbox"/> Relocated Buildings 409

SECTION 4: BUILDING HEIGHT AND AREA

	Existing	Proposed
No. of Floors/Stories (include Basement levels) & Area Per Floor (Sq Ft)		
Total Area (Sq Ft) and Total Height		

SECTION 5: USE GROUP (Check as applicable, at least one is required.) IBC Chapter 3

A: Assembly <input type="checkbox"/> A-1 <input type="checkbox"/> A-2 <input type="checkbox"/> A-3 <input type="checkbox"/> A-4 <input type="checkbox"/> A-5 <input type="checkbox"/> Nightclub	B: Business <input type="checkbox"/>	E: Education <input type="checkbox"/>
F: Factory <input type="checkbox"/> F-1 <input type="checkbox"/> F-2	H: High Hazard <input type="checkbox"/> H-1 <input type="checkbox"/> H-2 <input type="checkbox"/> H-3 <input type="checkbox"/> H-4 <input type="checkbox"/> H-5	
I: Institutional <input type="checkbox"/> I-1 <input type="checkbox"/> I-2 <input type="checkbox"/> I-3 <input type="checkbox"/> I-4	M: Mercantile <input type="checkbox"/>	R: Residential <input type="checkbox"/> R-1 <input type="checkbox"/> R-2 <input type="checkbox"/> R-3 <input type="checkbox"/> R-4
S: Storage <input type="checkbox"/> S-1 <input type="checkbox"/> S-2	U: Utility <input type="checkbox"/>	S: Special Use <input type="checkbox"/> and please describe below:

Special Use: _____

SECTION 6: CONSTRUCTION TYPE (required) IBC Chapter 6

<input type="radio"/> IA	<input type="radio"/> IB	<input type="radio"/> IIA	<input type="radio"/> IIB	<input type="radio"/> IIIA	<input type="radio"/> IIIB	<input type="radio"/> IV	<input type="radio"/> VA	<input type="radio"/> VB
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SECTION 7: SITE INFORMATION (Refer to 780CMR 111.0 for details on each item)

Water Supply: <input type="radio"/> Public <input type="radio"/> Private	Flood Zone Information: <input type="checkbox"/> Check if outside Flood Zone or Identify Zone	Sewage Disposal: <input type="radio"/> Indicate Municipal <input type="radio"/> On site system	Trench Permit: <input type="radio"/> A trench will not be required <input type="radio"/> Trench permit is enclosed	Debris Removal: <input type="checkbox"/> Licensed Disposal Site <input type="checkbox"/> Other
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Railroad right-of-way:

- Not Applicable
 Consent to Build Enclosed

Hazards to Air Navigation:

Is Structure within airport approach area?
 Yes No

MA Historic Commission Review Process:

Is their review completed?
 Yes No

Edition of Code	Use Group(s)	Type of Construction	Occupant Load per Floor
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Does the building contain a Sprinkler System? <input type="radio"/> Yes <input type="radio"/> No	Special Stipulations
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SECTION 9: PROPERTY OWNER AUTHORIZATION

Name and Address of Property Owner:

Full Name	No. and Street	City/Town	Zip
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Property Owner Contact Information:

Name *	Telephone No. (business) *	Telephone No. (cell) *	E-mail address *
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If applicable, the property owner hereby authorizes the following to act on the property owner's behalf, in all matters relative to work authorized by this permit application.

Full Name	No. and Street	City/Town	Zip
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SECTION 10: CONSTRUCTION CONTROL (Please fill out Appendix 2)

(If building is less than 35,000cu. ft. of enclosed space and/or not under Construction Control then **Check Here** and skip Section 10.1)

10.1 Registered Professional Responsible for Construction Control

Name (Registrant)	Telephone No.	E-mail address	Registration Number
Address	City	Zip	Discipline Expiration Date

10.2 General Contractor (Person Responsible for Construction)

Name	Telephone No.	E-mail address	Company Name	Expiration Date
Address	City	Zip	License Type	License No.

SECTION 11: WORKERS' COMPENSATION INSURANCE AFFIDAVIT (M.G.L. c.152, § 256(6))

A Workers' Compensation Insurance Affidavit from the MA Department of Industrial Accidents must be completed and submitted with this application
Failure to provide this affidavit will result in the denial of the issuance of the building permit.

Is a signed Affidavit submitted with this application? * Yes No

SECTION 12: ESTIMATED CONSTRUCTION VALUES

Item	Estimated Costs: (Labor and Materials)	Building Permit Fee = \$12 per every \$1000 of Total Construction Cost
1. Building *	\$	Note: Minimum Fee \$100 Total Construction Cost (from Item 6) = Estimated building permit fee:
2. Electrical	\$	
3. Plumbing	\$	
4. Mechanical (HVAC)	\$	
5. Mechanical (Fire Suppression)	\$	
6. Total Project Cost	\$	

SECTION 13: SIGNATURE OF BUILDING PERMIT APPLICANT

By entering my name below, I hereby attest under the pains and penalties of perjury that all of the information contained in this application is true and accurate to the best of my knowledge and understanding

Signature (Type Your Name) *	Title *	Telephone No. *	
Street Address *	City/Town *	State *	Zip *