



# The Commonwealth of Massachusetts

Department of Public Safety  
Massachusetts State Building Code (780 CMR)

Building Permit Application to Construct, Repair, Renovate or Demolish any  
Building other than a One- or Two-Family Dwelling

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## Code and Other Requirements for Building Permits

The Department of Public Safety has issued these building permit application forms so that municipalities across the state can move toward use of a single permit form and consistent permit application process. The MA State Building Code specifies the requirements of building permits and the applicant is advised to review and be familiar with these requirements in order to avoid some of the common permit application problems. Likewise the applicant should be aware that some municipalities require that the owner confirm, even prior to acceptance of the building permit application, that no outstanding property taxes, water fees, etc. exist.

## Filing Instructions

1. Please contact the city or town where the work will be done to ensure that the city or town will accept this application form and if any additional information is required, and obtain the correct mailing address. After doing so, print the application, fill in completely and then submit to the local city or town where the work will be done.
2. All applications shall be considered complete and will be reviewed if construction documents, specifications, fee, and other materials that may be required as indicated in the Building Permit Application are included with the application.
3. Please include a check for the Building Permit fee. The fee may be calculated using the information to be supplied in section 12 of the Building Permit Application. The check is to be made payable to the local city or town where the work will be done.



# The Commonwealth of Massachusetts

Department of Public Safety  
Massachusetts State Building Code (780 CMR)

## 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: \_\_\_\_\_

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

No. and Street \_\_\_\_\_ City /Town \_\_\_\_\_ Zip Code \_\_\_\_\_ Name of Building (if applicable) \_\_\_\_\_

### SECTION 2: PROPOSED WORK

Edition of MA State Code used \_\_\_\_\_ If New Construction check here  or check all that apply in the two rows below

Existing Building  Repair  Alteration  Addition  Demolition  (Please fill out and submit Appendix 1)

Change of Use  Change of Occupancy  Other  Specify: \_\_\_\_\_

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

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 Investigation and Evaluation is enclosed (See 780 CMR 34)

Existing Use Group(s): \_\_\_\_\_ Proposed Use Group(s): \_\_\_\_\_

### 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 (ft.)		

### SECTION 5: USE GROUP (Check as applicable)

A: Assembly A-1  A-2  Nightclub  A-3  A-4  A-5  B: Business  E: Educational

F: Factory F-1  F2  H: High Hazard H-1  H-2  H-3  H-4  H-5

I: Institutional I-1  I-2  I-3  I-4  M: Mercantile  R: Residential R-1  R-2  R-3  R-4

S: Storage S-1  S-2  U: Utility  Special Use  and please describe below:

Special Use: \_\_\_\_\_

### SECTION 6: CONSTRUCTION TYPE (Check as applicable)

IA  IB  IIA  IIB  IIIA  IIIB  IV  VA  VB

### SECTION 7: SITE INFORMATION (refer to 780 CMR 111.0 for details on each item)

Water Supply: Public <input type="checkbox"/> Private <input type="checkbox"/>	Flood Zone Information: Check if outside Flood Zone <input type="checkbox"/> or identify Zone: _____	Sewage Disposal: Indicate municipal <input type="checkbox"/> or on site system <input type="checkbox"/>	Trench Permit: A trench will not be required <input type="checkbox"/> or trench permit is enclosed <input type="checkbox"/>	Debris Removal: Licensed Disposal Site <input type="checkbox"/> or specify: _____
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Railroad right-of-way: Not Applicable <input type="checkbox"/> or Consent to Build enclosed <input type="checkbox"/>	Hazards to Air Navigation: Is Structure within airport approach area? Yes <input type="checkbox"/> or No <input type="checkbox"/>	MA Historic Commission Review Process: Is their review completed? Yes <input type="checkbox"/> No <input type="checkbox"/>
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### SECTION 8: CONTENT OF CERTIFICATE OF OCCUPANCY

Edition of Code: \_\_\_\_\_ Use Group(s): \_\_\_\_\_ Type of Construction: \_\_\_\_\_ Occupant Load per Floor: \_\_\_\_\_

Does the building contain an Sprinkler System?: \_\_\_\_\_ Special Stipulations: \_\_\_\_\_

**SECTION 9: PROPERTY OWNER AUTHORIZATION**

Name and Address of Property Owner

Name (Print) \_\_\_\_\_ No. and Street \_\_\_\_\_ City/Town \_\_\_\_\_ Zip \_\_\_\_\_

Property Owner Contact Information:

Title \_\_\_\_\_ Telephone No. (business) \_\_\_\_\_ Telephone No. (cell) \_\_\_\_\_ e-mail address \_\_\_\_\_  
 If applicable, the property owner hereby authorizes

Name \_\_\_\_\_ Street Address \_\_\_\_\_ City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 to act on the property owner's behalf, in all matters relative to work authorized by this building permit application.

**SECTION 10: CONSTRUCTION CONTROL (Please fill out Appendix 2)**

(If building is less than 35,000 cu. 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 _____
Street Address _____	City/Town _____	State _____ Zip _____	Discipline _____ Expiration Date _____

**10.2 General Contractor**

Company Name \_\_\_\_\_

Name of Person Responsible for Construction \_\_\_\_\_ License No. and Type if Applicable \_\_\_\_\_

Street Address \_\_\_\_\_ City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone No. (business) \_\_\_\_\_ Telephone No. (cell) \_\_\_\_\_ e-mail address \_\_\_\_\_

**SECTION 11: WORKERS' COMPENSATION INSURANCE AFFIDAVIT (M.G.L. c. 152, § 25C(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: CONSTRUCTION COSTS AND PERMIT FEE**

Item	Estimated Costs: (Labor and Materials)	Total Construction Cost (from Item 6) = \$ _____  Building Permit Fee = Total Construction Cost x _____ (Insert here appropriate municipal factor) = \$ _____.  Note: Minimum fee = \$ _____ (contact municipality)  Enclose check payable to _____ (contact municipality) and write check number here _____
1. Building	\$ _____	
2. Electrical	\$ _____	
3. Plumbing	\$ _____	
4. Mechanical (HVAC)	\$ _____	
5. Mechanical (Other)	\$ _____	
6. Total 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.

Please print and sign name \_\_\_\_\_ Title \_\_\_\_\_ Telephone No. \_\_\_\_\_ Date \_\_\_\_\_

Street Address \_\_\_\_\_ City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Municipal Inspector to fill out this section upon application approval: \_\_\_\_\_ Name \_\_\_\_\_ Date \_\_\_\_\_

## Appendix 2

Construction Documents are required for structures that must comply with 780 CMR 107. The checklist below is a compilation of the documents that may be required for this. The applicant shall fill out the checklist and provide the contact information of the registered professionals responsible for the documents. This appendix is to be submitted with the building permit application.

### Checklist for Construction Documents\*

No.	Item	Mark "x" where applicable		
		Submitted	Incomplete	Not Required
1	Architectural			
2	Foundation			
3	Structural			
4	Fire Suppression			
5	Fire Alarm (may require repeaters)			
6	HVAC			
7	Electrical			
8	Plumbing (include local connections)			
9	Gas (Natural, Propane, Medical or other)			
10	Surveyed Site Plan (Utilities, Wetland, etc.)			
11	Specifications			
12	Structural Peer Review			
13	Structural Tests & Inspections Program			
14	Fire Protection Narrative Report			
15	Existing Building Survey/Investigation			
16	Energy Conservation Report			
17	Architectural Access Review (521 CMR)			
18	Workers Compensation Insurance			
19	Hazardous Material Mitigation Documentation			
20	Other (Specify)			
21	Other (Specify)			
22	Other (Specify)			

\*Areas of Design or Construction for which plans are not complete at the time of application submittal must be identified herein. Work so identified must not be commenced until this application has been amended and the proposed construction document amendment has been approved by the authority having jurisdiction. Work started prior to approval may be subjected to *triple the original permit fee.*

### Registered Professional Contact Information

Name (Registrant)	Telephone No.	e-mail address	Registration Number
Street Address	City/Town	State	Zip
Discipline	Expiration Date		
Name (Registrant)	Telephone No.	e-mail address	Registration Number
Street Address	City/Town	State	Zip
Discipline	Expiration Date		
Name (Registrant)	Telephone No.	e-mail address	Registration Number
Street Address	City/Town	State	Zip
Discipline	Expiration Date		

# **COMMERCIAL CHECKLIST FOR BUILDING APPLICATION**

- Building permit application filled out and signed by legal owner or agent.
- Conservation Approval letter if any wetland.
- Three (3) Sets of plans for building or structure to 1/4" scale, including (1) 11" X 17" for office.
- Plot Plan showing location of building or structure to lot lines.
- Fire Department approval
- Sewer Department Approval or Disposal Construction Permit.
- Water district Approval Letter or Water Well Report.
- Driveway Permit from DPW (508-278-8616) at 147 Hecla St, Uxbridge.
- Copies of any Variances or Special Permits Granted by Planning or Zoning Boards.
- Written finding/Release of new lots from Planning Board.
- Worker's Compensation Affidavit required by the Commonwealth of Massachusetts.
- Certificate of Liability Insurance with Town of Uxbridge A Certificate holder.
- Street number is required for an application of building permit.
- Energy compliance report (70 meet IECC 2009 or MA RES-CHECK software)
- Code narrative, minimum building size, type, use & codes involved.

## **Structures containing more than 35,000 cubic feet**

- be properly stamped per section 102.1.1 and meet the requirements of section Shall 107.6 controlled consideration.
- Initial Construction Control Document. To be submitted with Building Application.
- Required Inspection & Site Review Document. Requires preliminary meeting with person in charge to go over required inspections.
- Phase Consideration Control Document Required on large projects.
- Final Construction Control Document Submitted at Completion of Construction.
- Building Code Narrative Listing all principles involved in project with proper stamp per Massachusetts Building Code.

## BBRS Official Interpretation No. 2012\_6

**Date:** October 9, 2012

**Subject:** 8th Edition Base Code; Construction control and Registered Design Professional in Responsible Charge, Sections 107.6 and 107.3.4.1

### INTRODUCTION

The 8<sup>th</sup> Edition of the MA State Building Code (780 CMR) has duplication and/or conflict between two (2) administrative sections of Chapter 1: Sections 107.3.4.1 and Section 107.6.4.

The following background information and series of questions and answers will clarify these code sections and provide guidance on application of construction control.

### BACKGROUND

780 CMR has historically regulated the construction oversight of certain “commercial” buildings (35,000 ft<sup>3</sup> or greater in interior aggregate volume and where *registered design professional* services are required per Section 107.6.1).

This construction oversight is referred to as “construction control”, and is unique to Massachusetts, with the associated regulations found in Chapter 1, Section 107.6. Within this section is 107.6.4, titled: “On-Site Project Representation” and where, for unusual designs or large magnitude projects or where reference standards require special architectural or engineering inspections, the building official **may require** (emphasis added) full time, on-site project representation by a *registered design professional* (RDP) in addition to the RDPs required for design and construction oversight under Section 107.6.2.2. It is recognized that the role of this full time, on-site representative is that of providing coordination of the activities of the RDPs required under Section 107.6.2.2.

In addition 780 CMR incorporates the *International Building Code 2009* (IBC) which includes IBC Section 107.3.4.1 and addresses a “*registered design professional in responsible charge*” (RDPRC). The IBC Commentary to Section 107.3.4.1 in part, reads: “Since (required) documents and reports are prepared by numerous individuals, firms and agencies, it is necessary to have a single person charged with responsibility for coordinating their submittal to the building official.”

IBC Section 107.3.4.1 essentially serves the same function as the full time on-site representative set forth in Section 107.6.4 that is being a key coordinator ensuring reports, records, etc. are provided to the building official, however project size and complexity are not considered so it is unclear if this applies to all construction control projects. This official interpretation addresses this issue.

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### QUESTION 1

Given the apparent duplication and/or conflict in requirements between Section 107.3.4.1 and Section 107.6.4, how should building officials and the regulated community treat these code sections?

### ANSWER 1

Section 107.3.4.1 which requires coordination efforts by RDPRC should be viewed as serving the same function as the full time, on-site RDP (providing coordination services) required in Section 107.6.4. Note that a full time on-site RDP should only be imposed as discussed in question 5 below.

## **QUESTION 2**

On projects of unusual design or magnitude of construction or where reference standards require special architectural or engineering inspections the building official may require (emphasis added) full time on-site representation by a single RDP per Section 107.6.4. Is this single individual responsible for assuring that detailed design and construction activities are in accordance with the approved plans?

### **ANSWER 2**

No, unless the on-site RDP has designed and has construction oversight of the entire project.

## **QUESTION 3**

What is the role of the RDP who serves as the On Site Project Representative per Section 107.6.4?

### **ANSWER 3**

He or she shall provide project coordination and keep daily records and submits reports if required by the building official and will submit the final reports of the various RDPs identified in Section 107.6.2.1 & 107.6.2.2.

## **QUESTION 4**

Can an RDP who serves as the On Site Project Representative per Section 107.6.4 and the RDPRC, identified in Section 107.3.4.1 be the same individual since both are providing coordination services to the building official?

### **ANSWER 4**

Yes.

## **QUESTION 5**

Can the building official require full time, on-site project representation by a RDP?

### **ANSWER 5**

Yes but this is not intended to be common practice and should only be done where projects are of a large or complex nature as generally indicated by Section 107.6.4. A large building undergoing a small renovation or a small building of simple design would typically not warrant full time, onsite, representation by an RDP.

## **QUESTION 6**

Can a building official rely on project coordination efforts of clerks of the works or project managers who are not RDPs?

### **ANSWER 6**

Yes. It is very common for building officials to rely on the coordination efforts of clerks of the works or project managers who are not RDPs, when projects are not of unusual design or magnitude. Note that the applicable requirements of Section 107.6.2.2 would still need to be satisfied by the RDPs with design and construction control responsibilities.

## **QUESTION 7**

What individuals are responsible for defining special testing and providing detailed plans outlining any and all special testing, and inspections, per the requirements of Chapter 17, "STRUCTURAL TESTS AND SPECIAL INSPECTIONS"?

### **ANSWER 7**

Although a RDPRC is referenced in Chapter 17, the RDPs with design and construction control responsibilities per Section 107.6.2.2 must satisfy these requirements.

## **QUESTION 8**

Does the building code require the RDP to submit to the building official all three construction control documents<sup>a</sup>?

**ANSWER 8**

It is up to the discretion of the building official and depends on the project. For a simple project the *Final Construction Control Document* is required and the other two documents may be required by the building official. This is consistent with section 107.6.4 which requires that, "Upon completion of the work, the registered design professional shall file a final report indicating that the work has been performed in accordance with the approved plans and this code."

In an effort to create consistency for both RDPs and building officials, the *Final Construction Control Document* found at [www.mass.gov/dps](http://www.mass.gov/dps) is provided to demonstrate compliance with the requirements of section 107.6.4. With regard to the remaining two documents, the code leaves it to the discretion of the building official to determine whether their submission shall be required. If the building official requires this additional documentation per section 107.6.6.2, the RDPs will be expected to use and submit the documents found at the DPS website.

Note a.

- 1) Initial Construction Control Document
- 2) Phase Construction Control Document
- 3) Final Construction Control Document





# Required Inspections and Site Review Document

As a condition of the building permit the following Inspections and Site Reviews identified by the building official are required for work per the 8<sup>th</sup> Edition of the Massachusetts State Building Code, 780 CMR, Section 110 and Chapter 17

Project Title: \_\_\_\_\_ Date: \_\_\_\_\_

Property Address: \_\_\_\_\_ Building Permit No.: \_\_\_\_\_

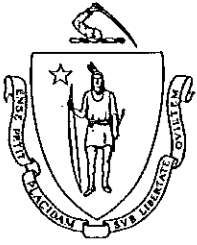
<b>Required Inspections to be performed by the Building Official<sup>1,6</sup></b>			
Inspection	X	Inspection	X
Preliminary (prior to start)		Roofing System/Attachment	
Soil/Footing/Foundation		Smoke/Heat/Fire Alarm System <sup>2</sup>	
Concrete Slab/Under Floor		Carbon Monoxide System <sup>4</sup>	
Flood Elevation/Certificate		Sprinkler/Standpipe/Fire Pump <sup>3</sup>	
Framing – Floor/Wall/Roof		Fire/Smoke Dampers	
Lath and Gypsum Board		Witness Special Inspections	
Fire/Smoke Resistant Assemblies		Accessibility (521 CMR)	
Energy Code Inspections		Manufactured Building Set	
Sheet Metal Inspections		Other:	
Emergency Lighting/Exit Signage			
All Means of Egress Componentes		Final inspection	
<b>Required Site Review and Documentation for Portions or Phases of Construction<sup>1,6,7</sup></b> (to be performed by the appropriate registered design professional or his/her designee or M.G.L.c 112 §81R contractor)			
Site Review and Documentation	X	Site Review and Documentation	X
Soil condition/analysis/report		Energy Efficiency Requirements	
Footing and Foundation (including reinforcement and foundation attachment)		Fire Alarm Installation <sup>2</sup>	
Concrete Floor and Under Floor		Fire Suppression Installation <sup>3</sup>	
Lowest Floor Flood Elevation		Field Reports <sup>5</sup>	
Structural Frame – wall/floor/roof		Carbon Monoxide Detection System <sup>4</sup>	
Lath and Plaster/Gypsum		Seismic reinforcement	
Fire Resistant Wall/Partitions framing		Smoke Control Systems	
Fire Resistant Wall/Partitions finish attachments		Smoke and Heat Vents	
Above Ceiling inspection		Accessibility (521 CMR)	
Fire Blocking/Stopping System		Other:	
Emergency Lighting/Exit Signage			
Means of Egress Componentes		Other Special Inspections (Section 1704):	
Roofing, coping/System			
Venting Systems (kitchen and cleanouts, chemical, fume)			
Mechanical Systems			

1. It is the responsibility of the permit applicant to notify the building official of required inspections (x). Inspection of 780 CMR fire protection systems may be witnessed by the fire official and installation permits are required from the fire department per 527 CMR.
2. Include NFPA 72 test and acceptance documentation
3. Include applicable NFPA 13, 13R, 13D, 14, 15, 17, 20, 241, etc. - test and acceptance documentation
4. Include NFPA 720 Record of Completion and Inspection and Test Form
5. Include field reports and related documentation
6. Work shall not proceed, or be concealed, until the required inspection has been approved by the building official, and nothing within construction control shall have the effect of waiving or limiting the building official's authority to enforce this code with respect to examination of the contract documents, including plans, computations and specifications, and field inspections.
7. Rough and/or finish inspections of electrical, plumbing, or sheet metal shall be inspected prior to rough and finish inspections by the building official.

I (type or print name) \_\_\_\_\_ am the building permit applicant and by entering my name below I attest under the pains and penalties of perjury that I have received this checklist of required inspections and approvals and will copy all individuals with 780 CMR 107 responsibility.

Signature: \_\_\_\_\_ Phone No.: \_\_\_\_\_ Email: \_\_\_\_\_  
Signature or type name if electronic signature

Building Official Use Only	
Building Official Name: _____	Date: _____



# Initial Construction Control Document

To be submitted with the building permit application by a

**Registered Design Professional**

for work per the 8<sup>th</sup> edition of the

Massachusetts State Building Code, 780 CMR, Section 107

Project Title: \_\_\_\_\_ Date: \_\_\_\_\_

Property Address: \_\_\_\_\_

Project: Check one or both as applicable:       New construction       Existing Construction

Project description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I \_\_\_\_\_ MA Registration Number: \_\_\_\_\_ Expiration date: \_\_\_\_\_, am a *registered design professional*, and I have prepared or directly supervised the preparation of all design plans, computations and specifications concerning:

- Architectural       Structural       Mechanical
- Fire Protection       Electrical       Other \_\_\_\_\_

for the above named project and that to the best of my knowledge, information, and belief such plans, computations and specifications meet the applicable provisions of the Massachusetts State Building Code, (780 CMR), and accepted engineering practices for the proposed project. I understand and agree that I (or my designee) shall perform the necessary professional services and be present on the construction site on a regular and periodic basis to:

1. Review, for conformance to this code and the design concept, shop drawings, samples and other submittals by the contractor in accordance with the requirements of the construction documents.
2. Perform the duties for registered design professionals in 780 CMR Chapter 17, as applicable.
3. Be present at intervals appropriate to the stage of construction to become generally familiar with the progress and quality of the work and to determine if the work is being performed in a manner consistent with the approved construction documents and this code.

Nothing in this document relieves the contractor of its responsibility regarding the provisions of 780 CMR 107.

When required by the building official, I shall submit field/progress reports (see item 3.) together with pertinent comments, in a form acceptable to the building official.

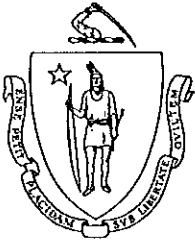
Upon completion of the work, I shall submit to the building official a 'Final Construction Control Document'.

Enter in the space to the right a "wet" or electronic signature and seal:

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

Building Official Use Only

Building Official Name: \_\_\_\_\_ Permit No.: \_\_\_\_\_ Date: \_\_\_\_\_



# Construction Control Progress Checklist

To be submitted at completion of required site reviews for construction progress per the 8<sup>th</sup> edition of the Massachusetts State Building Code, 780 CMR, Section 107

Project Title: \_\_\_\_\_ Date: \_\_\_\_\_ Permit No. \_\_\_\_\_

Property Address: \_\_\_\_\_

I, \_\_\_\_\_ MA Registration Number: \_\_\_\_\_ Expiration date: \_\_\_\_\_ am a *registered design professional* and I or my designee have observed the following work, and to the best of my knowledge, information, and belief the construction work indicated below has been performed in a manner consistent with the approved plans and specifications.

Required Site Review and Documentation for Portions or Phases of Construction <sup>1,6</sup> (to be performed by the appropriate registered design professional or his/her designee or M.G.L.c 112 §81R contractor)			
Site Review and Documentation	X	Site Review and Documentation	X
Soil condition and analysis		Energy Efficiency Requirements	
Footing and Foundation, including Reinforcement and Foundation attachment		Fire Alarm Installation <sup>2</sup>	
Concrete Floor and Under Floor		Fire Suppression Installation <sup>3</sup>	
Lowest Floor Flood Elevation		Field Reports <sup>5</sup>	
Structural Frame – wall/floor/roof		Carbon Monoxide Detection System <sup>4</sup>	
Lath and Plaster/Gypsum		Seismic reinforcement	
Fire Resistant Wall/Partitions framing		Smoke Control Systems (Special Inspection per Sections 909.3 and 909.18.8)	
Fire Resistant Wall/Partitions finish attachments		Smoke and Heat Vents	
Above Ceiling inspection		Accessibility (521 CMR)	
Fire Blocking/Stopping System		Other:	
Emergency Lighting/Exit Signage			
Means of Egress Componentes		Special Inspections (Section 1704):	
Roofing, coping/System			
Venting Systems (kitchen and cleanouts, chemical, fume)			
Mechanical Systems			

1. Indicate with an 'x' the work you reviewed for compliance with the approved plans and specifications and describe in detail below.
2. Include NFPA 72 test and acceptance documentation
3. Include applicable NFPA 13, 13R, 13D, 14, 15, 17, 20, 241, etc. - test and acceptance documentation
4. Include NFPA 720 Record of Completion and Inspection and Test Form
5. Include field reports and related documentation
6. Nothing contained within construction control shall have the effect of waiving or limiting the building official's authority to enforce this code with respect to examination of the contract documents, including plans, computations and specifications, and field inspections.

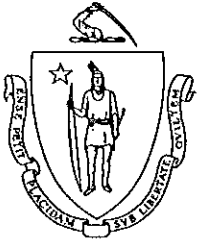
Description of Construction Work Observed<sup>a</sup>:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

<sup>a</sup> Describe in sufficient detail the work (i.e. foundation steel reinforcing, kitchen vent system, etc.) and the location on the project site, and list if applicable, the submittal documents that pertain to the work which was inspected.

Enter in the space to the right a "wet" or electronic signature and seal:

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

Building Official Use Only	
Building Official Name: _____	Date: _____



# Final Construction Control Document

To be submitted at completion of construction by a  
**Registered Design Professional**  
for work per the 8<sup>th</sup> edition of the  
Massachusetts State Building Code, 780 CMR, Section 107

Project Title: \_\_\_\_\_ Date: \_\_\_\_\_ Permit No. \_\_\_\_\_

Property Address: \_\_\_\_\_

Project: Check one or both as applicable:       New construction       Existing Construction

Project description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I \_\_\_\_\_ MA Registration Number: \_\_\_\_\_ Expiration date: \_\_\_\_\_, am a  
*registered design professional*, and I have prepared or directly supervised the preparation of all design plans,  
computations and specifications concerning:

- Architectural       Structural       Mechanical
- Fire Protection       Electrical       Other: \_\_\_\_\_

for the above named project. I, or my designee, have performed the necessary professional services and was present at the construction site on a regular and periodic basis. To the best of my knowledge, information, and belief the work proceeded in accordance with the requirements of 780 CMR and the design documents approved as part of the building permit and that I or my designee:

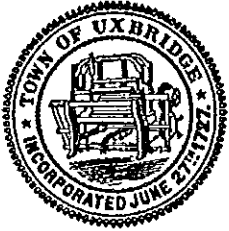
1. Have reviewed, for conformance to this code and the design concept, shop drawings, samples and other submittals by the contractor in accordance with the requirements of the construction documents.
2. Have performed the duties for registered design professionals in 780 CMR Chapter 17, as applicable.
3. Have been present at intervals appropriate to the stage of construction to become generally familiar with the progress and quality of the work and to determine if the work was performed in a manner consistent with the construction documents and this code.

Nothing in this document relieves the contractor of its responsibility regarding the provisions of 780 CMR 107.

Enter in the space to the right a "wet" or electronic signature and seal:

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

Building Official Use Only		
Building Official Name: _____	Permit No.: _____	Date: _____



Town of Uxbridge, Inspector of Buildings

21 South Main Street, Room 203.

Uxbridge, MA 01569

Phone# (508) 278-8600 x 5 Fax# (508) 278-0709

Office Hours: Mon. Tues. & Thurs. 7:30am – 5:00pm, Weds. 8:00am – 7:00pm  
FRIDAYS CLOSED

**CONSTRUCTION AND ADDITIONS  
MUST HAVE THE FOLLOWING:**

Please make sure all are included in packet for Building Permit

1.  Site Plan; (Plot Plan)
2.  Foundation plan and details (as necessary);
3.  Floor plans (including basement and attic levels, if applicable); floor plans shall include location of all required fire protection systems and heating systems storage areas.
4.  Three (3) copies of building plans; 1 being (11" X 17")
5.  Exterior building elevations;
6.  Framing plans and/or building section(s) adequately depicting structural systems;
7.  Schedules, legends and/or details adequately depicting doors, windows and related material installations.
8.  Energy conservation information;
9.  Mass-check Compliance Report;
10.  Workers Compensation (State Form)
11.  Liability Insurance & copy of License
12.  Building Permit Application (complete)

Failure to comply with above will result in denial of Building Permit

Thank you,  
Nelson Burlingame, Building Commissioner



The Commonwealth of Massachusetts  
 Department of Industrial Accidents  
 Office of Investigations  
 1 Congress Street, Suite 100  
 Boston, MA 02114-2017  
 www.mass.gov/dia

**Workers' Compensation Insurance Affidavit: Builders/Contractors/Electricians/Plumbers**  
**Applicant Information** **Please Print Legibly**

Name (Business/Organization/Individual): \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_

<p><b>Are you an employer? Check the appropriate box:</b></p> <p>1. <input type="checkbox"/> I am a employer with _____ employees (full and/or part-time).*</p> <p>2. <input type="checkbox"/> I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required.]</p> <p>3. <input type="checkbox"/> I am a homeowner doing all work myself. [No workers' comp. insurance required.] †</p> <p>4. <input type="checkbox"/> I am a general contractor and I have hired the sub-contractors listed on the attached sheet. These sub-contractors have employees and have workers' comp. insurance. ‡</p> <p>5. <input type="checkbox"/> We are a corporation and its officers have exercised their right of exemption per MGL c. 152, §1(4), and we have no employees. [No workers' comp. insurance required.]</p>	<p><b>Type of project (required):</b></p> <p>6. <input type="checkbox"/> New construction</p> <p>7. <input type="checkbox"/> Remodeling</p> <p>8. <input type="checkbox"/> Demolition</p> <p>9. <input type="checkbox"/> Building addition</p> <p>10. <input type="checkbox"/> Electrical repairs or additions</p> <p>11. <input type="checkbox"/> Plumbing repairs or additions</p> <p>12. <input type="checkbox"/> Roof repairs</p> <p>13. <input type="checkbox"/> Other _____</p>
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\*Any applicant that checks box #1 must also fill out the section below showing their workers' compensation policy information.  
 † Homeowners who submit this affidavit indicating they are doing all work and then hire outside contractors must submit a new affidavit indicating such.  
 ‡ Contractors that check this box must attached an additional sheet showing the name of the sub-contractors and state whether or not those entities have employees. If the sub-contractors have employees, they must provide their workers' comp. policy number.

***I am an employer that is providing workers' compensation insurance for my employees. Below is the policy and job site information.***

Insurance Company Name: \_\_\_\_\_

Policy # or Self-ins. Lic. #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Job Site Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

**Attach a copy of the workers' compensation policy declaration page (showing the policy number and expiration date). Failure to secure coverage as required under Section 25A of MGL c. 152 can lead to the imposition of criminal penalties of a fine up to \$1,500.00 and/or one-year imprisonment, as well as civil penalties in the form of a STOP WORK ORDER and a fine of up to \$250.00 a day against the violator. Be advised that a copy of this statement may be forwarded to the Office of Investigations of the DIA for insurance coverage verification.**

***I do hereby certify under the pains and penalties of perjury that the information provided above is true and correct.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Phone #: \_\_\_\_\_

<i>Official use only. Do not write in this area, to be completed by city or town official.</i>	
City or Town: _____	Permit/License # _____
<b>Issuing Authority (circle one):</b>	
1. Board of Health 2. Building Department 3. City/Town Clerk 4. Electrical Inspector 5. Plumbing Inspector	
6. Other _____	
Contact Person: _____	Phone #: _____

# Information and Instructions

Massachusetts General Laws chapter 152 requires all employers to provide workers' compensation for their employees. Pursuant to this statute, an *employee* is defined as "...every person in the service of another under any contract of hire, express or implied, oral or written."

An *employer* is defined as "an individual, partnership, association, corporation or other legal entity, or any two or more of the foregoing engaged in a joint enterprise, and including the legal representatives of a deceased employer, or the receiver or trustee of an individual, partnership, association or other legal entity, employing employees. However the owner of a dwelling house having not more than three apartments and who resides therein, or the occupant of the dwelling house of another who employs persons to do maintenance, construction or repair work on such dwelling house or on the grounds or building appurtenant thereto shall not because of such employment be deemed to be an employer."

MGL chapter 152, §25C(6) also states that "every state or local licensing agency shall withhold the issuance or renewal of a license or permit to operate a business or to construct buildings in the commonwealth for any applicant who has not produced acceptable evidence of compliance with the insurance coverage required." Additionally, MGL chapter 152, §25C(7) states "Neither the commonwealth nor any of its political subdivisions shall enter into any contract for the performance of public work until acceptable evidence of compliance with the insurance requirements of this chapter have been presented to the contracting authority."

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## Applicants

Please fill out the workers' compensation affidavit completely, by checking the boxes that apply to your situation and, if necessary, supply sub-contractor(s) name(s), address(es) and phone number(s) along with their certificate(s) of insurance. Limited Liability Companies (LLC) or Limited Liability Partnerships (LLP) with no employees other than the members or partners, are not required to carry workers' compensation insurance. If an LLC or LLP does have employees, a policy is required. Be advised that this affidavit may be submitted to the Department of Industrial Accidents for confirmation of insurance coverage. **Also be sure to sign and date the affidavit.** The affidavit should be returned to the city or town that the application for the permit or license is being requested, not the Department of Industrial Accidents. Should you have any questions regarding the law or if you are required to obtain a workers' compensation policy, please call the Department at the number listed below. Self-insured companies should enter their self-insurance license number on the appropriate line.

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## City or Town Officials

Please be sure that the affidavit is complete and printed legibly. The Department has provided a space at the bottom of the affidavit for you to fill out in the event the Office of Investigations has to contact you regarding the applicant. Please be sure to fill in the permit/license number which will be used as a reference number. In addition, an applicant that must submit multiple permit/license applications in any given year, need only submit one affidavit indicating current policy information (if necessary) and under "Job Site Address" the applicant should write "all locations in \_\_\_\_\_ (city or town)." A copy of the affidavit that has been officially stamped or marked by the city or town may be provided to the applicant as proof that a valid affidavit is on file for future permits or licenses. A new affidavit must be filled out each year. Where a home owner or citizen is obtaining a license or permit not related to any business or commercial venture (i.e. a dog license or permit to burn leaves etc.) said person is NOT required to complete this affidavit.

The Office of Investigations would like to thank you in advance for your cooperation and should you have any questions, please do not hesitate to give us a call.

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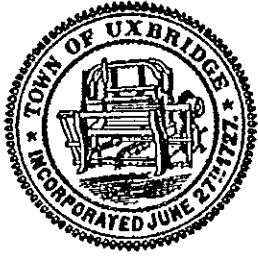
The Department's address, telephone and fax number:

The Commonwealth of Massachusetts  
Department of Industrial Accidents  
**Office of Investigations**  
1 Congress Street, Suite 100  
Boston, MA 02114-2017

Tel. # 617-727-4900 ext 7406 or 1-877-MASSAFE

Fax # 617-727-7749

[www.mass.gov/dia](http://www.mass.gov/dia)



# Town of Uxbridge, Inspector of Buildings

21 South Main Street, Room 203

Uxbridge, MA 01569

Phone # (508) 278-8600 x (5) Fax # (508) 278-0709

Email: [jbangma@uxbridge-ma.gov](mailto:jbangma@uxbridge-ma.gov)

Dear Property Owners:

Date: \_\_\_\_\_

Prior to applying for your building permit, you must get approval from each checked department listed below. Return this COMPLETED form with your permit application and materials.

Proposed Project: \_\_\_\_\_

Project Location: \_\_\_\_\_

Property Owner: \_\_\_\_\_

Map/Lot # \_\_\_\_\_ Zone: \_\_\_\_\_ Use Group: \_\_\_\_\_ Type: \_\_\_\_\_

<b>Department</b>	<b>X</b>	<b>Date</b>	<b>Remark</b>
Treasurer/Collector - <i>Always</i>	X		
Board of Health – <i>Approved Well Plans</i>			
Board of Health – <i>Approved Septic Plans</i>			
Conservation <i>Always with any digging</i>			
Fire Dept. <i>More than 1200 s.f. a floor</i>			
DPW – Water Dept <i>If using Town Water</i>			
DPW – Sewer Dept <i>If using Town Sewer</i>			
DPW – Highway Dept <i>Driveway Cut</i>			
Historic District Commission			
Zoning Board of Approval (if required)			
Planning Board (if Required)			

Office Hours: Mon. Tues & Thurs. 7:30 a.m. – 5:00 p.m. Weds. 8:00 a.m. – 7:00 p.m., **FRIDAY CLOSED**

(revised 2-10-14)