

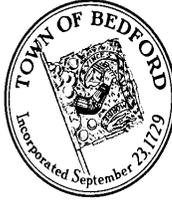
DEPARTMENT APPROVALS

Conservation _____

Public Works _____

Fire Department _____

Board of Health _____



Town of Bedford
 Building Department
 10 Mudge Way, Bedford, MA 01730
 Office: 781-275-7446 Fax: 781-275-1334

**PERMIT APPLICATION FOR
 ONE AND TWO FAMILY DWELLINGS**

Permit No. _____

OFFICE USE ONLY

DATE SUBMITTED _____

FOUNDATION PERMIT ISSUED _____

BUILDING PERMIT ISSUED _____

C/O FEE _____

FOUNDATION PERMIT FEE _____

BUILDING PERMIT FEE _____

TOTAL FEE _____

Approved by _____

1. OWNER INFORMATION

Name of Owner _____
If Applicable Partnership Corporation Other _____
 Address _____ Phone No. _____

2. CONTRACTOR INFORMATION

Licensed Builders Name _____
 D/B/A/ _____
 Address _____
 Phone No. _____ Email address: _____
 Construction Supervisors License No. _____ Expiration Date _____
 H.I.C. Registration No. _____ Expiration Date _____

I, as the licensed builder, will be responsible for all work performed under this permit.

Signature _____ Date _____

3. SITE INFORMATION

Property Address _____ Zoning District _____
 One Family Two Family
 Water Supply (MGL c40 s 54) Sewage Disposal
 Municipal Private Well Municipal Septic System

4. ESTIMATED CONSTRUCTION COST

- | | |
|----------------------|----------|
| 1. Building | \$ _____ |
| 2. Electrical | \$ _____ |
| 3. Plumbing/Gas | \$ _____ |
| 4. Mechancial (HVAC) | \$ _____ |
| 5. Fire Protection | \$ _____ |
| 6. Total | \$ _____ |

5. DESCRIPTION OF WORK

- | | |
|--|--|
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Accessory Structure |
| <input type="checkbox"/> Addition to Existing Building or Structure | <input type="checkbox"/> Move Existing Building or Structure |
| <input type="checkbox"/> Alterations to Existing Building or Structure | <input type="checkbox"/> Install Swimming Pool |
| <input type="checkbox"/> Repairs to Existing Building or Structure | <input type="checkbox"/> Install Stove |
| <input type="checkbox"/> Demolition of Existing Building or Structure | <input type="checkbox"/> Other _____ |

**If new construction please provide the following information:

Square Footage of Habitable Space _____ Total Square Footage _____

Describe, in detail, the scope of work being performed _____

6A. OWNER AUTHORIZATION - TO BE COMPLETED WHEN OWNER'S AGENT OR CONTRACTOR APPLIES FOR BUILDING PERMIT

I, _____, as owner of the subject property hereby authorize _____ to act on my behalf, in all matters relative to work authorized by this building permit application. As owner of the above mentioned property, I further acknowledge and accept the Town of Bedford's authority to inspect the work performed by the agent/contractor.

Signature of Owner

Date

6B. OWNER/AUTHORIZED AGENT DECLARATION

I, _____, as owner/authorized agent hereby declare that the statements and information on the foregoing application are true and accurate, to the best of my knowledge and belief.

Signed under the pains and penalties of perjury.

Signature of Owner/Authorized Agent

Date

7. DEBRIS DISPOSAL AFFIDAVIT

In accordance with the provisions of MGL Ch. 40 s54, a condition of this Building Permit is that the debris resulting from this work shall be disposed of in a properly licensed solid waste disposal facility as defined by MGL Ch. 111 s.50A.

The debris from this project will be disposed of in:

Name of Waste Facility

Address of Waste Facility

Signature of Permit Applicant

Date

8. HOMEOWNER LICENSE EXEMPTION

Job Location: _____ Date: _____

Homeowner: _____
Name Home Phone No. Work Phone No.

Definition of Homeowner - Person(s) who owns a parcel of land on which he/she resides or intends to reside, on which there is a one or two family dwelling, attached or detached structures accessory to such use and/or farm structures. A person who constructs more than one home in a two-year period shall not be considered a homeowner.

Massachusetts State Building Code, 780 CMR 6th Edition - Section 108.3.5.1

Any Homeowner performing work for which a building permit is required shall be exempt from the licensing provisions of 780 CMR 108.3.5 (Licensing of Construction Supervisors); provided that if a Homeowner engages a person(s) for hire to do such work, that such Homeowner shall act as supervisor. This exception shall not apply to the field erection of manufactured building constructed pursuant to 780 CMR 35 and 780 CMR R3.

Massachusetts State Building Code, 780 CMR 6th Edition - Section 110.5

It shall be the responsibility of the registered contractor to obtain all permits necessary for work covered by the Home Improvement Contractor Registration Law, M.G.L.c.142A. An owner who secures his or her own permits for such shall be excluded from the quaranty fund provisions as defined in M.G.L.c.142c.

The undersigned "homeowner" assumes responsibility for compliance with the State Building Code and other applicable codes, by-laws, rules and regulations. The undersigned "homeowner" certifies that he/she understands the Town of Bedford Inspectional Services minimum inspection procedures and requirements and that he/she will comply with said procedures and requirements.

Homeowner's Signature: _____ Approval of Building Official: _____

9.. SUBCONTRACTORS' COMPENSATION INSURANCE AFFIDAVIT FOR SOLE PROPRIETOR

Company Name: _____ Type of Work Performed: _____
Address: _____
City: _____ Phone No.: _____
Insurance Co.: _____ Policy No.: _____

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Address: _____
City: _____ Phone No.: _____
Insurance Co.: _____ Policy No.: _____

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Insurance Co.: _____ Policy No.: _____