The Commonwealth of Massachusetts
Board of Building Regulations and Standards
Massachusetts State Building Code, 780 CMR – 8th Edition

Building Permit Application To Construct, Repair, Renovate Or Demolish a *One- or Two-Family Dwelling*

Town of Reading
Building Department
16 Lowell Street
Reading, MA 01867
781.942.6613

TO HELP EXPEDITE APPLICATION, EMAIL ADDRESSES ARE REQUIRED

Two (2) hard copies of plans needed with this application. An electronic copy of the plan is also needed – you may email ksaunders@ci.reading.ma.us

Conservation Approval Required ☐ Yes ☐ No

_____
Signature

Dumpster Permit Required ☐ Yes ☐ No
*Will there be a dumpster at the work site: ☐ Yes ☐ No
*Dumpster Permit applied for on:_____

SECTION 1: SITE INFORMATION

1.1 Property Address:

_____
1.1a Is this an accepted street? yes_____ no_____

1.2 Assessors Map & Parcel Numbers

Map Number _____ Parcel Number _____

1.3 Zoning Information:

Zoning District _____ Proposed Use _____

1.4 Property Dimensions:

Lot Area (sq ft) _____ Frontage (ft) _____

1.5 Building Setbacks (ft)

Front Yard		Side Yards		Rear Yard	
Required	Provided	Required	Provided	Required	Provided

1.6 Water Supply: (M.G.L c. 40, §54)
Public ☐ Private ☐

1.7 Flood Zone Information:
Zone: ___ Outside Flood Zone? Check if yes☐

1.8 Sewage Disposal System:
Municipal ☐ On site disposal system ☐

SECTION 2: PROPERTY OWNERSHIP[1]

2.1 Owner[1] of Record:

Name (Print) _____ Address _____ **Email Address** _____

Signature _____ Home Telephone _____ **Cell Number** _____

SECTION 3: DESCRIPTION OF PROPOSED WORK[2] (check all that apply)

New Construction ☐	Existing Building ☐	Owner-Occupied ☐	Repairs(s) ☐	Alteration(s) ☐	Addition ☐
Demolition ☐	Accessory Bldg. ☐	Number of Units_____	Other ☐ Specify:_____		

Brief Description of Proposed Work[2]:_____

If roofing and siding job – how many squares:_____ (Total roof coverage cannot exceed 2 layers: 780 CMR 3609.10.3)

SECTION 4: ESTIMATED CONSTRUCTION COSTS

Item	Estimated Costs: (Labor and Materials)
1. Building	$
2. Electrical	$
3. Plumbing	$
4. Mechanical (HVAC)	$
5. Mechanical (Fire Suppression)	$
6. **Total Project Cost**:	$

Official Use Only

1. Building Permit Fee: $_____ Indicate how fee is determined:
☐ Standard City/Town Application Fee
☐ Total Project Cost[3] (Item 6) x multiplier _____ x _____
2. Other Fees: $_____
List:_____

Total All Fees: $_____
Check No. _____ Check Amount: _____ Cash Amount:_____
☐ Paid in Full ☐ Outstanding Balance Due:_____

SECTION 5: CONSTRUCTION SERVICES

5.1 Construction Supervisor License (CSL)

Name of CSL Holder

No. and Street

City/Town, State, ZIP

Business Telephone

Cell Number **Email Address**

License Number Expiration Date

List CSL Type (see below) _____

Type	Description
U	Unrestricted (Buildings up to 35,000 cu. ft.)
R	Restricted 1&2 Family Dwelling
M	Masonry
RC	Roofing Covering
WS	Window and Siding
SF	Solid Fuel Burning Appliances
I	Insulation
D	Demolition

5.2 Registered Home Improvement Contractor (HIC)

HIC Company Name or HIC Registrant Name

No. and Street

City/Town, State, ZIP Business Telephone

HIC Registration Number Expiration Date

Email Address

Cell Number

SECTION 6: WORKERS' COMPENSATION INSURANCE AFFIDAVIT (M.G.L. c. 152. § 25C(6))

Workers Compensation Insurance affidavit 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.

Signed Affidavit Attached? Yes ..... ☐ No ..... ☐

SECTION 7a: 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.

Print and Sign Owner's Name Date

SECTION 7b: OWNER[1] OR AUTHORIZED AGENT DECLARATION

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.

Print and Sign Owner's or Authorized Agent's Name Date

NOTES:

1. An Owner who obtains a building permit to do his/her own work, or an owner who hires an unregistered contractor (not registered in the Home Improvement Contractor (HIC) Program), will ***not*** have access to the arbitration program or guaranty fund under M.G.L. c. 142A. Other important information on the HIC Program can be found at www.mass.gov/oca Information on the Construction Supervisor License can be found at www.mass.gov/dps

2. When substantial work is planned, provide the information below:

Total floor area (sq. ft.) _____ (including garage, finished basement/attics, decks or porch)

Gross living area (sq. ft.) _____ Habitable room count _____

Number of fireplaces_____ Number of bedrooms _____

Number of bathrooms _____ Number of half/baths _____

Type of heating system _____ Number of decks/ porches _____

Type of cooling system_____ Enclosed _____ Open _____

3. "Total Project Square Footage" may be substituted for "Total Project Cost"

The Commonwealth of Massachusetts
Department of Industrial Accidents
Office of Investigations
600 Washington Street
Boston, MA 02111
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 #: _____

Are you an employer? Check the appropriate box:

1. ☐ I am a employer with _____ employees (full and/or part-time).*
2. ☐ I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required.]
3. ☐ I am a homeowner doing all work myself. [No workers' comp. insurance required.] †
4. ☐ 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.‡
5. ☐ 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.]

Type of project (required):

6. ☐ New construction
7. ☐ Remodeling
8. ☐ Demolition
9. ☐ Building addition
10. ☐ Electrical repairs or additions
11. ☐ Plumbing repairs or additions
12. ☐ Roof repairs
13. ☐ Other _____

*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 #: _____

Official use only. Do not write in this area, to be completed by city or town official.

City or Town: _____ **Permit/License #** _____

Issuing Authority (circle one):
1. Board of Health 2. Building Department 3. City/Town Clerk 4. Electrical Inspector 5. Plumbing Inspector
6. Other _____

Contact Person: _____ **Phone #:** _____

GLEN REDMOND
COMMISSIONER OF BUILDINGS
Town Hall, 16 Lowell Street, Reading, MA 01867-2683
Phone: 781-942-6613 Fax: 781-942-9071
Daily Office Hours: Monday through Thursday: 7:00 – 8:30 AM
Monday and Thursday: 12:30-1:30 PM Tuesday: 5:00-7:00 PM

Construction Supervisor License Exemption for Homeowners

Date _____

Homeowner _____

Address _____ Phone _____

Massachusetts State Building Code Section 110.R5.1.3.1

Licensing of Construction Supervisors
Individuals supervising persons engaged in construction, reconstruction, alteration, repair, removal or demolition involving any activity regulated by any provision of 780 CMR, shall be licensed in accordance with 780 CMR 110.R5. Individuals engaged in the supervision of the field erection of manufactured buildings in accordance with 780 CMR 110.R3, shall be licensed as construction supervisors.

Exception: Any homeowner performing work for which a building permit is required shall be exempt from the licensing provisions of 780 CMR 110.R5, provided that if a homeowner engages a person(s) for hire to do such work, then such homeowner shall act as supervisor. This exception shall not apply to the field erection of a manufactured buildings constructed pursuant to 780 CMR 110.R3.

Note: Any Licensed Construction Supervisor who contracts to do work for a homeowner shall be responsible for performing said work in accordance with 780 CMR and manufacture's recommendations, as applicable, whether or not the licensed contractor secured the permit for said work.

For purposes of this section only, a "homeowner is defined as follows: For the purposes of 780 CMR The Massachusetts Amendments to the International Building Code Eighth Edition a **Homeowner** is defined as follows: Person(s) who owns a parcel of land on which he/she resides or intends to reside, on which there is, or intends to be 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.

The undersigned "homeowner" assumes full responsibility for compliance with the State Building Code, other applicable codes, by-laws, regulations and the Town of Reading Building Department inspection procedures and requirements.

_____ _____

Homeowner Signature **Date**

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COMMISSIONER OF BUILDINGS
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Building Permit Affidavit – Home Improvement Contractor Law

Notice is hereby given that homeowners applying for their own Building Permit or dealing with unregistered contractors for applicable home improvement work do not have access to the Arbitration Program or Guaranty Fund under Massachusetts General Laws (MGL) C.142.

The Massachusetts amendments to the International Building Code Eighth Edition: Code 780 CMR: Licensing of Construction Supervisors; 110.R5.1.3.1 (formally 780 CMR 108.3.5) – Individuals supervising persons engaged in construction, reconstruction, alteration, repair, removal or demolition involving any activity regulated by any provision of 780 CMR, shall be licensed in accordance with 780 CMR 11.R5. Individuals engaged in the supervision of the field erection of manufactured buildings in accordance with 780 CMR 110R3, shall be licensed construction supervisors.

Exception: Any homeowner performing work for which a building permit is required shall be exempt from the licensing provisions of CMR 780 110.R5, provided that if a homeowner engages a person(s) for hire to do such work, that such homeowner shall act as supervisor. The exception shall not apply to the field erection of a manufactured building constructed pursuant to 780 CMR 110.R3

Note: Any Licensed Construction Supervisor who contracts to do work for a homeowner shall be responsible for performing said work in accordance with 780 CMR and manufacture's recommendations, as applicable, whether or not the licensed contractor secured the permit for said work.

DEFINITION OF HOMEOWNER
For the purposes of 780 CMR The Massachusetts Amendments to the International Building Code Eighth Edition a **Homeowner** is defined as follows: Person(s) who owns a parcel of land on which he/she resides or intends to reside, on which there is, or intends to be 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.

110.R5.1.3.2 Exemptions A Construction Supervisor's License is not required for:

1. construction of swimming pools, the erection of signs, or the erection of tents;
2. projects which are subject to construction control pursuant to Chapter 1 of the *International Building Code 2009* with Massachusetts Amendments (780 CMR 1.00);
3. agricultural buildings which are not open to the public or otherwise made available for public use;
4. *registered design professionals* provided such comply with the construction supervisor oversight requirements set forth in 780 CMR 110.R5 generally and 750 CMR 110.R5.2.12, as applicable;
5. Massachusetts certified *building officials*, provided such certification is current and they comply with the oversight requirements of 780 CMR 110.R5 generally and 780 CMR 110.R5.2.12, as applicable.
6. the practice of any trade licensed by agencies of the commonwealth (see M.G.L.c. 112, §81R), provided that any such work is within the scope of said license including, but not limited to wiring, plumbing gas fitting, fire protection systems, pipefitting, HVAC and refrigeration equipment.

110.R5.1.3.3 Municipal Requirements No municipality shall be prohibited from requiring a license for those individuals engaged in directly supervising persons engaged in construction, reconstruction, alteration, repair, removal or demolition in those categories of building and structures for which *780 CMR R5* the BBRS does not require a license.

The undersigned **HOMEOWNER** assumes responsibility for compliance with the Massachusetts State Building code Eighth Edition and other applicable codes, by-laws, rules and regulations AND certifies that he/she understands the Town of Reading Building Department minimum inspection procedures and requirements and that he/she will comply with said procedures and requirements.

OWNER NAME: _____ ADDRESS: _____

HAVING READ THE ABOVE NOTICE, I HEREBY APPLY FOR A BUILDING PERMIT AS THE OWNER OF THE ABOVE PROPERTY:

_____ _____
HOMEOWNER SIGNATURE **DATE**

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."

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.

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.

The Department's address, telephone and fax number:

The Commonwealth of Massachusetts
Department of Industrial Accidents
Office of Investigations
600 Washington Street
Boston, MA 02111

Tel. # 617-727-4900 ext 406 or 1-877-MASSAFE
Fax # 617-727-7749
www.mass.gov/dia

Revised 4-24-07

SECTION R105.7 - PLACEMENT OF PERMIT

The building permit or copy thereof shall be kept on the site of the work and be posted conspicuously until the completion of the project.

This means that work <u>shall not start</u> <u>until</u> the permit is issued and posted at the site.

SECTION R105.3.1 – ACTION ON APPLICATION

The *building official* shall examine or cause to be examined applications for permits and amendments, and take action, within **30 days** of filing.

SECTION R105.5 – EXPIRATION

Every *permit* issued shall become invalid unless the work authorized by such *permit* is commenced within 180 days after its issuance, or if the work authorized by such *permit* is suspended or abandoned for a period of 180 days after the time work is commenced. The building official is authorized to grant, in writing, one or more extensions of time, for periods not more than 180 days each. The extension shall be requested in writing and justifiable cause demonstrated.

SECTION R110.1 – USE OF OCCUPANCY

No building or structure shall be used or occupied, and no change in the existing occupancy classification of a building or structure or portion thereof shall be made until the *building official* has issued a certificate of occupancy, therefor as provided herein.

780 CMR 8TH Edition Section R106 Requirements for ALL 1 & 2 Family Projects

Per 5310.7 Construction Documents, the following are considered to be the MINUMUM documentation for ALL permit applications

Please utilize the boxes on this checklist to assure completeness

Scaled drawings & details shall be submitted with each application proposing construction, reconstruction, addition, alteration, demolition, or repair. The building official may waive the requirements for filing plans when the work involved is of a minor nature.

A.) **SITE PLAN**

- ☐ Property address: map & lot number, zoning district & Overlays (wetlands, floodplain, etc.)
- ☐ Show well and septic locations (if applicable)
- ☐ Location of lot lines, dimensions of lot, frontage
- ☐ Location & dimensions of public easements, public utility easements, railroad right-of-ways. and established zoning setback requirements
- ☐ Location & dimensions of primary & accessory buildings & structures

B.) **FLOOR PLANS**

- ☐ Floor plan of each floor and any intermediate levels including basements, crawlspaces, terraces, porches, garages, carports, and decks
- ☐ Dimensions, location & materials of foundations, footings, columns, beams & piers (including any reinforcing)
- ☐ Direction, dimensions, spacing, species & grade of all framing members (floors, roofs, wall partitions
- ☐ Location of all walls, partitions, windows, stairs & doors
- ☐ Location & description of all electrical equipment and alarm devices
- ☐ Location & type of all heating and air conditioning (HVAC) equipment

C.) **EXTERIOR ELEVATIONS**

- ☐ Front, rear & side elevations including foundation depth and finish grades
- ☐ Location & dimensions of windows & doors (attach window & door schedule)
- ☐ Show exterior stair locations & dimensions
- ☐ Show chimney and vent locations

D.) **DETAIL & SECTIONS**

- ☐ Attach compliance paperwork for energy requirements: see **IECC (International Energy Conservation Code)**
- ☐ Sections through exterior walls showing details of construction from footing to the highest point of the building (see attached)
- ☐ Sections through shafts, landings & stairs- include framing details, tread, riser, headroom
- ☐ Describe location & dimensions of handrails & guardrails
- ☐ Section through fireplaces & chimneys (show dimensions and clearances)
- ☐ Location & details of any roof trusses, glue-lam, or engineered lumber (include connection & bracing details and Mass professionals stamp on specification sheet)
- ☐ Braced wall panel details

Required Inspections

The Massachusetts State Building Code 8th Edition requires one (1) copy of the approved plans and specifications together with the work or building permit to be kept at the site/work area of operation at all times during the process of the work authorized by the BUILDING INSPECTOR. It is the responsibility of the person obtaining the permit to notify the BUILDING INSPECTOR when the work is ready for inspection and no work should be covered before it has been inspected and approved.

REQUESTS FOR INSPECTIONS are usually required in accordance with the following schedule – **48 hour** advance notice shall be given:

- ☐ **Footings**: inspector to observe footing forms in place prior to pouring concrete
- ☐ **Foundation**: inspector to observe foundation walls/damp proofing prior to backfill
- ☐ **Sub-trade Inspections**: call appropriate inspector for individual inspections including, but not limited to: Plumbing, Gas, Electrical, Fire Department or Health Department
- ☐ **Frame**: inspection required after Plumbing, Gas and Electrical inspections
- ☐ **Mechanical**: to be observed at frame inspection before insulation
- ☐ **Insulation**: to be observed prior to wall board
- ☐ As Built plans may be required for new dwellings and additions
- ☐ **Final Inspection**: **prior** to permitted use and occupancy and after Plumbing, Gas, Electrical, Fire Department, Engineering, Health Department or Conservation work has been signed off and approved

- ☐ **ALL** permits need a **FINAL** – the building permit will need to be brought into the Town Hall before a final inspection. **Building Department hours are**: Monday – Thursday 7:00 a.m. – 5:30 p.m.

Contact Telephone Numbers

Inspection Service	Inspectors Name	Contact Telephone Number
Building Inspector	Glen Redmond	781.942.6613
Electrical Inspector*	Robert Morrocco	781.942.6614
Plumbing & Gas Inspector*	Peter Sparco	781.942.6615
Health Department		781.942.9061
Engineering		781.942.9082
Fire Department		781.944.3132
Conservation Administrator	Charles Tirone	781.942.6616
Dig Safe	www.digsafe.com	888-344-7233 (72 hour notice)

*Inspector office hours are Monday - Thursday 7:00-8:00 a.m. – they book their own inspections.