



Town of Reading
16 Lowell Street
Reading, MA 01867

PUBLIC SERVICES DEPARTMENT
Building Division
Mon - Wed - Thu 7:00 AM – 5:30 PM
Tues 7:00 AM – 7:00 PM ~ Fri Closed
Phone 781-942-6613 ~ Fax 781-942-9071
www.readingma.gov

Request for Occupancy

Address of Project: _____

Name of Owner: _____ **Permit #:** _____

Name of Contractor: _____

Address: _____

Phone: _____ **Email:** _____

Can be occupied as: _____

Documents needed before an inspection can be done (if applicable):

- Air Leakage Test for new HVAC in unconditioned space
- As-Built Plan if an addition, new dwelling, decks, porches or ZBA
- Final Affidavits (Commercial)
- HERS Rater/Blower Door Test if a new dwelling

Signature: _____ **Date:** _____

Signature required on permit card:

- Conservation – look at building permit card for this request
- Electrical
- Engineering – garage, new dwelling, AQP District
- Fire – added bedroom, new dwelling, attached garage
- Gas/Plumbing
- Health – look at building permit card for this request
- Planning – new business, commercial project