MASSACHUSETTS UNIFORM APPLICATION FOR A PERMIT TO PERFORM PLUMBING WORK

CITY ___________________________ MA DATE ___________________ PERMIT # __________

JOB SITE ADDRESS ___________________ OWNER’S NAME ________________

OWNER ADDRESS ___________________ TEL ___________________ FAX ________

OCCUPANCY TYPE
COMMERCIAL ☐ EDUCATIONAL ☐ RESIDENTIAL ☐

NEW ☐ RENOVATION: ☐ REPLACEMENT: ☐ PLANS SUBMITTED: YES ☐ NO ☐

FIXTURES

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CROSS CONNECTION DEVICE
DEDICATED SPECIAL WASTE SYSTEM
DEDICATED GAS/OIL/SAND SYSTEM
DEDICATED GREASE SYSTEM
DEDICATED GRAY WATER SYSTEM
DEDICATED WATER RECYCLE SYSTEM

DISH WASHER
DRINKING FOUNTAIN
FOOD DISPOSER
FLOOR / AREA DRAIN
INTERCEPTOR (INTERIOR)
KITCHEN SINK
LAVATORY
ROOF DRAIN
SHOWER STALL
SERVICE / MOP SINK
TOILET
URINAL
WASHING MACHINE CONNECTION
WATER HEATER ALL TYPES
WATER PIPING

OTHER

INSURANCE COVERAGE:

I have a current liability insurance policy or its substantial equivalent which meets the requirements of MGL Ch. 142. YES ☐ NO ☐

IF YOU CHECKED YES, PLEASE INDICATE THE TYPE OF COVERAGE BY CHECKING THE APPROPRIATE BOX BELOW

LIABILITY INSURANCE POLICY ☐ OTHER TYPE OF INDENTITY ☐ BOND ☐

OWNER’S INSURANCE WAIVER: I am aware that the licensee does not have the insurance coverage required by Chapter 142 of the Massachusetts General Laws, and that my signature on this permit application waives this requirement.

CHECK ONE ONLY: OWNER ☐ AGENT ☐

SIGNATURE OF OWNER OR AGENT

I hereby certify that all of the details and information I have submitted or entered regarding this application are true and accurate to the best of my knowledge and that all plumbing work and installations performed under the permit issued for this application will be in compliance with all Pertinent provision of the Massachusetts State Plumbing Code and Chapter 142 of the General Laws.

PLUMBER’S NAME ___________________________ LICENSE # ___________ SIGNATURE ____________

MP ☐ JP ☐ CORPORATION ☐ # ___________ PARTNERSHIP ☐ # ___________ LLC ☐ # ___________

COMPANY NAME ___________________________ ADDRESS ____________________________

CITY __________________ STATE ______ ZIP ______ TEL __________

FAX ___________ CELL ______ EMAIL ______

Cash
Check # _______ Amt. $ _______ PI & Gas
Inspector _______
Alt. PI & Gas
Inspector _______
PLUMBING

Residential (1 & 2 Family)
New Construction (1 & 2 Family, 0 - 2,500 S.F.) $200
Each Additional 1,000 S.F. $100
Alterations/Additions
Fixtures $75 Each + $40 Base Fee
Underground Inspections $35/Inspection
Gas Water Heater (New or Conversion) $40
Gas Water Heater (Replacement) $20
Elec. Water Heater (New or Conversion) $50
Elec. Water Heater (Replacement) $40
Demolition (Only) $25/Inspection
Backflow (Heating System) $35
Backflow (Water & Sewer Lines) $35
Re-Inspection Fee $40
Work w/Out Permit Double Fee
Failure to Call for Final within 10 Days of Completion $30

Commercial (Including 3 Family)
New Construction (Including 3 Family) $18/$1,000 + $50 Base Fee
Alterations/Additions $18/$1,000 + $50 Base Fee
Re-Inspection Fee $50
Work w/Out Permit Double Permit Fee
Failure to Call for Final within 10 Days of Completion $30

NOTE: ALL HEATING APPLIANCE REQUIRE ELECTRICAL PERMIT!

TOWN OF BRAINTEE
Department of Municipal Licenses and Inspections
Andy J. Lyne, Jr. PLUMBING & GAS INSPECTOR
OFFICE HOURS: 8:00AM - 9:30AM AND 3:00PM - 4:30PM
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