	MASSA	CHUSE	TS UN	IFORI	M APF	PLICAT	ION F	OR A	PERMI	тто	PERF	ORM G	AS FI	TTING	WOR	K
	CITY:						_MA.	DAT	E:			_	PERMIT	#		
	JOBSITE ADD															
G	OWNER ADDI															
TYPE OR PRINT	OCCUPANCY															
CLEARLY	NEW: □	RENOVAT	ON:	RE	PLACE	MENT: [PLA	NS SUB	MITTE	D: YES		
APPLIANCES'	1 FLOOR→	Bsmt	1	2	3	4	5 :	6	7	8	9	10	11	12	13	14
BOILER							1						I	I	M T	
BOOSTER	150115-00	<u> </u>								П			1	ii.		
CONVERSION BI	UKNER														31	
DIRECT VENT HI	FATER	-		1	-		_			_					- 1/	
DRYER	EN EN															
FIREPLACE	<u> </u>					 			,						_	
FRYOLATOR																
FURNACE		= = = = = = = = = = = = = = = = = = = =			=	4/2-			2.2							
GENERATOR							_									
GRILLE INFRARED HEAT	ED		-		7											
LABORATORY C			_	-							- 1				- 4	
MAKEUP AIR UN			G)		_							-				-
OVEN														1.0.	-	
POOL HEATER	<u>. II</u>		П													
ROOM / SPACE I				,								-				
ROOF TOP UNIT												1				
TEST	<u> </u>			<u> </u>	11										- 14	
UNIT HEATER UNVENTED ROO	MUEATED									11		4	1,44		- 44	
WATER HEATER										,				-	-	
WATERTIER	· .				-		-		1							
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	I II					1				1				131		
Ţ II	ĺ				INSU	JRANCE	COVE	RAGE								-
I have a current !	liability insurand	ce policy (or its sul	ostantia	al equiv	alent wi	hich me	ets the	require	ments	of MGL	. Ch. 142	2 Y	ES 🗌	NO 🔲	
If you have chec	ked YES, please	e indicate t	he tyne	of cove	race h	, checki	no the	annmni	rista hov	r helow	,					
,							•									
	LIABILIT	Y INSURAI	NCE POI	LICY L		0	THER T	YPE IN	DEMNIT	Y 🔲		BON	D 🗌			
OWNER'S INSUR	RANCE WAIVER	: I am awa	re that ti	ne licen	see do	es not h	ave the	insura	nce cov	erane i	enuire	l by Cha	inter 1.4	2 of the	3	
Massachusetts (General Laws, a	nd that my	signatu	re on th	is perr	nit appli	cation	waives	this req	uireme	nt.		iboor 13	_ 01 410	•	
						• •		П						_	1	
SIGNATURE OF	OWNER OR AG	FNT			_	-			СН	ECK 0	NE ON	LY: OV	VNER	A A	GENT [
hereby certify tha Knowledge and th	it all of the details	s and inform	nation I h	ave sub	mitted ((or enter	ed) rega	arding th	is applic	ation a	e true a	and accur	rate to t	he best	of my	1
provision of the M	assachusetts Sta	ate, Plumbin	g Code a	and Cha	pter 14	2 of the	General	Laws.	uns app	RCallon	WIII De	ın compi	iance w	iin ali P	erunent	
PLUMBER/GASF										_		SIGN	ATURE			
COMPANY NAM	E:			<u> </u>		AD	DRESS									
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ROUGH GAS INSPECTION NOTES THIS PAGE FOR INSPECTOR USE ONLY YES NO THIS APPLICATION SERVES AS THE PERMIT FEE: \$ PERMIT ** PLAN REVIEW NOTES	Photographic Properties in the control of the contr