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MASSACHUSETTS UNIFORM APPLICATION FOR PERMIT TO DO PLUMBING

(Print or Type)



Boxborough, MA 01719

Date _____ 20 _____

Permit # _____

Building Location _____ Owner's Name _____

Type of Occupancy: _____

P

New

Renovation

Replacement

Plans Submitted: Yes No

Fee _____

FIXTURES

	WATER CLOSETS	KITCHEN SINKS	LAVATORIES	BATHTUBS	SHOWER STALLS	DISHWASHERS	LAUNDRY TRAYS	WASH. MACH. CONN.	HOT WATER TANKS	TANKLESS	SLOP SINKS	FLOOR DRAINS	GAS TRAPS	URINALS	DRINKING FOUNTAIN	AREA DRAIN	WATER PIPING	ROOF DRAINS	BACKFLOW PREV.	OTHER FIXTURES	
SUB-BSMT.																					
BASEMENT																					
1ST FLOOR																					
2ND FLOOR																					
3RD FLOOR																					
4TH FLOOR																					
5TH FLOOR																					
6TH FLOOR																					
7TH FLOOR																					
8TH FLOOR																					

Installing Company Name _____

Check one: Certificate Corporation _____

Address _____

Partnership _____

Business Telephone _____

Firm /Co. _____

Name of Licensed Plumber _____

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 have checked yes, please indicate the type of coverage by checking the appropriate box

A liability insurance policy Other type of indemnity Bond

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

Check One:

Owner Agent

Signature of Owner or Owner Agent _____

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

For inspections, call: **Gary Corey**
Boxborough
(978) 263-5595
7:00 a.m. - 5:00 p.m.

Signature of Licensed Plumber _____

Type of License: Master

Journeyman

License Number