



## FIRE ALARM - SPRINKLER PERMIT APPLICATION

### Commercial Permit Application

### The "Town of Boxborough Massachusetts"

To Construct a NEW Building, Repair, Renovate or Demolish an Existing Building  
(Other than a One- or Two-Family Dwelling)

FILL OUT ALL THE APPROPRIATE INFORMATION FOR YOUR PROJECT

#### This Section For Official Use Only

Bldg. Permit #:

Date Issued:

Building Official:

Building Permit Fee:

#### SECTION 1: PROPERTY LOCATION

Please Check One: FIRE ALARM APPLICATION -  SPRINKLER SYSTEM APPLICATION -

Street & No.

Name of Building (if applicable)-

Floor:

Unit No:

Company Name:

#### SECTION 2: PROPERTY OWNER INFORMATION & AUTHORIZATION

Name:

Company:

Address:

City/State/Zip

EMAIL:

Telephone:

Letter From Property Owner(S) Authorizing This Work Shall Be Submitted With The Application

#### Section 3. CHECK ONE:

A - New System -  Stamped Plans & Calculations Required

B - Modifying Existing System -  Narrative (Plans on Modifications - May Be Required if more than just minor)

#### Registered Design Professional Responsible For "Design of the System"

Name:

Reg. Number:

Address:

City/Town/state/zip:

EMAIL:

Telephone:

Name & Address of Company/Firm:

#### INSTALLING CONTRACTOR:

Company Name:

Address:

City/Town/state/zip:

EMAIL:

Telephone:

Name of Person Responsible for Installation:

Address: City/Town/State

License Number & Type:

EMAIL:

Telephone:

#### SECTION 5: PROPOSED WORK

Edition of MA State Building Code- If New Construction check here and all that apply below -

Existing Building -  Repair-  Alteration -  Addition -

Other: Specify:

Building plans & Construction documents Have Been Submitted As Part Of This Permit Yes -  No -

<b>Brief Description of proposed work:</b>

**SECTION 12: CONSTRUCTION COSTS-LABOR AND MATERIALS**

Electrical-Fire Alarm & Emergency Lights-Signs Etc.	\$
	\$
Sprinkler System-Fire Suppression	\$

**NOTE:** You will be notified when the Building Permit is ready. Building Permit fees are due at that time and you will be notified of the amount. Checks are to be made payable to the "Town of Boxborough". The cost of the permit is \$10.00 per Thousand (1%).

<b>COST OF CONSTRUCTION-Building Permit Valuations-PERMIT FEES</b>
<p><b>Building Permit Valuations.</b> The applicant for a permit shall provide an estimate of permit value at time of application. If, in the opinion of the <i>Building Commissioner, Local Inspector, Electrical Inspector, Plumbing &amp; Gas Inspector</i> the valuation is underestimated on the application, the permit shall be denied, unless the applicant can show detailed estimates to meet the approval of the <i>Building Commissioner</i>.</p> <p><i>The Final Building Permit, Plumbing Permit, Gas Permit &amp; Electrical permit valuation shall be set by the Building Commissioner, Local Inspector, Electrical Inspector, Plumbing &amp; Gas Inspector issuing the permit</i></p>

**SECTION 13: SIGNATURE OF PERMIT APPLICANT**

By entering my name below, I hereby attest under the pains & 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-Name	
Address:	
City/State/Zip	
EMAIL:	Telephone:
Signature:	

**NOTE:** Submitted plans must be complete, wet stamped including **Fire Suppression, Detection and Notification systems. Suppression system must also carry the name, contact information and license of the "Installer". All Plans must be submitted to the Building Department Only, Not the Fire department. HOWEVER:** Contractors are required under section 527 CMR 1.00 M.G.L. c. 148, § 27A to notify the fire department prior to shutting off for any reason(s) any portion of the Fire Suppression, Detection and OR Notification systems.

**~ APPLICATIONS & PLANS SHALL BE RETURNED IF SIGNIFICANT INFORMATION IS MISSING~**  
**Please also attach the following as applicable to your project:**

- Copy of all appropriate Licenses
- Fire Narrative for Existing & New Buildings
- Worker's Comp Insurance
- Fire Suppression/Protection Narrative-**All buildings**

SEE - Directions on all narratives-last page of this application

**SECTION 4: WORKER'S COMPENSATION INSURANCE AFFIDAVIT (M. G. L. C. 152 § 25C(6)A**

<p>Worker's Compensation Insurance Affidavit from MA Department of Industrial Accidents must be completed and submitted with this application. Failure to supply this affidavit will result in the DENIAL of the issuance of this building permit. Is a signed affidavit submitted with this application? YES- <input type="checkbox"/> NO- <input type="checkbox"/></p>
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The Commonwealth of Massachusetts  
 Department of Industrial Accidents  
 1 Congress Street, Suite 100  
 Boston, MA 02114-2017  
 www.mass.gov/dia

Workers' Compensation Insurance Affidavit: Builders/Contractors/Electricians/Plumbers.  
 TO BE FILED WITH THE PERMITTING AUTHORITY.

**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 an 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 homeowner and will be hiring contractors to conduct all work on my property. I will ensure that all contractors either have workers' compensation insurance or are sole proprietors with no employees.
- 5.  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. ‡
- 6.  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):

- 7.  New construction
- 8.  Remodeling
- 9.  Demolition
- 10.  Building addition
- 11.  Electrical repairs or additions
- 12.  Plumbing repairs or additions
- 13.  Roof repairs
- 14.  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 MGL c. 152, §25A is a criminal violation punishable by 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. 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 #: \_\_\_\_\_

## **Fire Alarm & Detection Systems Section 907**

### **Mandated Document Submittals for Building Permit Application**

Fire alarm shop drawings. Shop drawings for fire alarm systems shall be submitted to the **Building Department & Fire Department** for review and approval prior to system installation, and shall include, but not be limited to, all of the items listed under Chapter 9, section 907.1: **Equipment**. Systems and components shall be *listed* and *approved* for the purpose for which they are installed.

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## **Fire Protection/Suppression Systems**

### **Mandated Document Submittals for Building Permit Application**

780 CMR - Eighth Edition

**This information is critical in processing the Building Permit Application. If your plans for a Fire suppression system are not 100% complete, Then you are required to submit a completed “Tier One Narrative” with your application**

This process includes three tiers of the minimum document submittal requirements as stated in Chapter 9, section 901.2.1. This process does not preclude the permit applicant from submitting additional documents; for example shop drawings along with the *construction documents* at time of permit application. **Shop drawings shall note the name(s), license number(s), and license expiration date(s) of the contractor(s) installing the Fire Protection Systems.**

**1. TIER ONE, CONSTRUCTION DOCUMENTS** - Prior to issuance of a building permit, *construction documents* for the fire protection system must be submitted in accordance with Chapter 1: *Scope and Administration* and a building permit obtained prior to the installation of fire protection systems or modifications, alterations, additions or deletions to an existing fire protection system. The *construction documents* shall contain sufficient information to completely describe each of the fire protection system(s) for which a permit is to be issued.

**The *construction documents* shall include the items listed under 2009 IBC Chapter 9, Mass Amendments Section 901.2.1.**

**2. Tier Two, Shop Drawings** - Prior to installation of fire protection systems, shop drawings, where applicable, shall be submitted to the *building official* and fire official and shall contain, but not be limited to; detailed design layout, equipment specifications, system sequence of operation, and analysis to substantiate the design. Shop drawings shall note the name(s), license number(s) and license expiration date(s) of the contractor(s) installing the fire protection systems. **Exception.** For shop drawings of Fire Alarm and Detection Systems *see* section 907.1.2 above for applicable requirements.

**3. Tier Three, Record Drawings** - As built plans shall be provided to the building owner for all fire protection and life safety systems that are sealed as reviewed and approved by the *registered design professional* of legally recognized professional performing Construction Control. Where changes to original shop drawings are minor, a list of as-built changes shall be permitted to be submitted where sealed and reviewed and approved by the *registered design professional* or **legally recognized professional performing Construction Control.**