

 <p>The Commonwealth of Massachusetts State Board of Building Regulations and Standards Massachusetts State Building Code 780 CMR</p>	 <p>TOWN OF NAHANT BUILDING DEPARTMENT, TOWN HALL 334 Nahant Road NAHANT, MA 01908</p>
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Commonwealth of Massachusetts

Sheet Metal Permit

Date	6/20/2013	Permit #	
Estimated Job Cost :	\$ 5333	Permit Fee :	\$ 100
Plans Submitted : YES <input type="radio"/> NO <input type="radio"/>	Plans Reviewed : YES <input type="radio"/> NO <input checked="" type="radio"/>		
Business License #	52	Applicant License #	469
Business Information :		Property Owner / Job Location Information :	
Name :	CENTRAL COOLING & HEATING	Name :	NAHANT VILLAGE CHURCH INC
Street :	9 NORTH MAPLE STREET	Street :	CLIFF ST
City/Town :	WOBURN, MA 01801	City/Town :	NAHANT
Telephone :	7819228288	Telephone :	7815815691
Photo I.D. required / Copy of Photo I.D. attached : YES <input checked="" type="radio"/> NO <input type="radio"/> _____ <div style="text-align: right; margin-right: 50px;">Staff Initial</div>			
J-1 / M-1-unrestricted license			
J-2 / M-2-restricted to dwellings 3-stories or less and commercial up to 10,000 sq. ft. / 2-stories or less			
Residential : 1-2 family <input type="radio"/> Multi-family <input type="radio"/> Condo / Townhouses <input type="radio"/> Other(Specify) <input checked="" type="radio"/>			
Commercial : Office <input type="radio"/> Retail <input type="radio"/> Industrial <input type="radio"/> Educational <input type="radio"/> Institutional <input type="radio"/> Other(Specify) <input checked="" type="radio"/>			
Square Footage : under 10,000 sq. ft. <input checked="" type="radio"/> over 10,000 sq. ft. <input type="radio"/> Number of Stories: 2			
Sheet metal work to be completed : New Work : <input type="radio"/> Renovation : <input type="radio"/>			
HVAC <input checked="" type="radio"/> Metal Watershed Roofing <input type="radio"/> Kitchen Exhaust System <input type="radio"/>			
Metal Chimney / Vents <input type="radio"/> Air Balancing <input type="radio"/>			
Provide detailed description of work to be done :			
Rework ductwork. We are not installing a nwe duct system. We are correcting & reworking the existing system.			

INSURANCE COVERAGE :
I have a current <u>liability</u> insurance policy or its equivalent which meets the requirements of M.G.L. Ch. 112 Yes <input checked="" type="radio"/> No <input type="radio"/>
If you have checked Yes, indicate the type of coverage by checking the appropriate box below:
A liability insurance policy <input checked="" type="checkbox"/> Other type of indemnity <input type="checkbox"/> Bond <input type="checkbox"/>
OWNER'S INSURANCE WAIVER : I am aware that the licensee does not have the insurance coverage required by

Chapter 112 of the
Massachusetts General Laws, and that my signature on this permit application waives this requirement.

Signature of Owner or Owner's Agent

Check One Only

Owner Agent

By checking this box , 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 sheet metal work and installations performed under the permit issued for this application will be in compliance with all pertinent provision of the Massachusetts Building Code and Chapter 112 of the General Laws.

Duct inspection required prior to insulation installation: YES NO

Progress Inspections

<u>Date</u>	<u>Comments</u>

Final Inspection

<u>Date</u>	<u>Comments</u>

	Type of License :	
By :	<input checked="" type="checkbox"/> Master	
Title :	<input type="checkbox"/> Master-Restricted	_____
City/Town :	<input type="checkbox"/> Journeyman	Signature of Licensee
Permit # :	<input type="checkbox"/> Journeyman-Restricted	License Number : 469
Fee : \$ 100	<input type="checkbox"/>	Check at www.mass.gov/dpl

Inspector Signature of Permit Approval