



TOWN of MERRIMAC

Inspectional Services

APPLICATION FOR CERTIFICATE OF OCCUPANCY

Certificate of Occupancy No: _____ Date Issued: _____

Fee \$50.00 per unit: \$ _____ Receipt No: _____

I hereby request a Certificate of Occupancy pursuant to 780 CMR The Massachusetts State Building Code Section R110.0 or 111.0, as amended, and that the information provided is true and accurate.

Signature

Date

Location: _____ **Unit No:** _____ **Floor No:** _____

Proposed Use: Residential Attached Detached Commercial Size (sq ft): _____

Issue to: Property Owner Contractor Lessee/Tenant

Construction Type: Wood Masonry Structure Steel Concrete Other

Applicant's Name: _____ **d/b/a Name:** _____

Town/City/Zip: _____ **Phone:** _____

Contractor Name: _____ **License #:** _____

Address: _____ **Phone:** _____

Town/City/Zip: _____ **Cell Phone:** _____

Building Permit Number: _____ **Inspector:** _____

Electrical Permit Number: _____ **Inspector:** _____

Plumbing Permit Number: _____ **Inspector:** _____

Sprinkler Permit Number: _____ **Inspector:** _____

Mechanical Permit Number: _____ **Inspector:** _____

Board of Health Permit _____ **Inspector:** _____

Highway Department: _____ **Date:** _____

Water Department: _____ **Date:** _____ **As-Built:** _____

Waste Water Department: _____ **Date:** _____ **As-Built:** _____

Conservation Commission: _____ **Agent:** _____

CERTIFICATE OF OCCUPANCY FEE CALCULATION

1. Certificates of Occupancy of existing structure:

No. of Units _____ x \$50.00 = \$ _____

2. Certificate of Occupancy per dwelling unit - \$50.00 each:

No. of Units _____ x \$50.00 = \$ _____

3. Certificate of Occupancy for Commercial Building/Space, \$50 plus \$25 for each 1,000 sq ft gross floor area:

\$50.00 + (\$25.00 x _____ sq ft) = \$ _____
(each 1,000 sq ft)

4. Temporary or Partial Certificate of Occupancy (min.3 months), \$50 / month per unit:

\$50.00 x _____ x _____ = \$ _____
(no. of months) (no. of units)