

Telephone: 508-764-5412
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Inspection Services
41 Elm Street

TOWN OF SOUTHBRIDGE
SOUTHBRIDGE, MASSACHUSETTS 01550-2638

APPLICATION FOR CERTIFICATE OF INSPECTION
(ANNUAL & SEMI ANNUAL)

DATE: _____

IN ACCORDANCE WITH THE PROVISION OF 780 CMR, TABLE 110 THE MASSACHUSETTS STATE BUILDING CODE, 9TH EDITION, AS AMENDED, I HEREBY APPLY FOR A CERTIFICATE OF INSPECTION FOR THE BELOW NAMED PREMISES AT THE FOLLOWING ADDRESS:

PROPERTY/BUSINESS NAME: _____

LOCATION/ADDRESS OF PREMISE: _____

NO. OF BUILDINGS: _____ NO. OF STORIES: _____

OWNER OF RECORD: _____ PHONE: _____

OWNER ADDRESS: _____

CERTIFICATE TO BE ISSUED TO: _____ PHONE: _____

ADDRESS OF CERTIFICATE HOLDER: _____

SIGNATURE OF APPLICANT: _____

PRINT NAME: _____ TITLE: _____

INSTRUCTIONS:

- Application and fee must be received AT TIME OF APPLICATION.
- Submit copies of Annual Fire Alarm and Sprinkler Test Reports, if any.
- Return completed application with fee to: TOWN OF SOUTHBRIDGE, DEPARTMENT OF INSPECTION SERVICES, 41 ELM ST., SOUTHBRIDGE, MA 01550.
- Fee amount is \$100.00.
- Checks payable to: TOWN OF SOUTHBRIDGE.
- After application and fee is received, a representative of the Inspections Department will contact you to set up an inspection appointment.

FEE AMOUNT: \$ _____

OFFICIAL USE BELOW:

CHECK #	RECEIPT #	ISSUED DATE	EXPERATION DATE	USE GROUP
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