

BUILDING PERMIT INSTRUCTIONS

780 CMR CHAPTER 1 110.1 APPLICATION FOR PERMIT

It shall be unlawful to construct, reconstruct, alter, repair, remove or demolish a building or structure, or to change the use or occupancy of a building or structure; or to install or alter any equipment for which provision is made or the installation of which is regulated by 780 CMR without first filing a written application with the building official and obtaining the required permit therefore.

- See entirety of CMR 780 8th edition Section 105.1 amended for more details available online at www.mass.gov/DPS/BBRS .

CLASSIFICATION OF BUILDING PERMITS

1. Industrial, Business and Commercial
2. Residential (1 & 2 Family)– New Construction, alterations, additions, etc.
3. Other – Alternative energy, Demolition, Fences, Storage buildings, decks, patios, temporary structure, Mechanical Permits (sheet metal.)

All Building Permits issued by an approved dimensional variance will require a “foundation as built” plan before proceeding

REQUIREMENTS – INDUSTRIAL, BUSINESS AND COMMERCIAL

1. Application and all required documents to be filled out COMPLETELY
2. Investigation, evaluation submittal and control construction documents as required by 780 CMR 8th Edition and the IEBC must accompany the application.
3. Affidavit of licensed engineer/architect must accompany application. All plans must be certified to be in compliance with 780 CMR 8th Edition.
4. Plans and application to be submitted to and endorsed by various Town Boards and departments as required by the Building Inspector.
Note: Various Boards will have their own filing requirements and procedures. Please contact them directly for further information or some information may be available online at www.avonmass.org .
5. All structures exceeding 35,000 cubic feet require construction control affidavits.
6. All fire alarm and fire protection equipment and systems require permits and Fire Department review.
7. DIG SAFE number. (for dig safe info www.digsafe.com .)
8. Design professional review as required by the International Existing Building Code (IEBC) formerly 780CMR ch.34
9. All Energy Conservation documents as required by 780CMR and IECC Amended International Energy Conservation Code and/or ASHRAE handbook are required with application. (available at www.energycodes.gov)
10. Non refundable Application Fee of \$125 must be paid in FULL with application, permit fee to be determined from attached schedule.
11. As “Bonding” agents, the Board of Selectmen may be the last to sign or endorse the application.
12. Complete application with required endorsement. Three (3) copies of building and site plans, certificates, affidavits, energy conservation, waste removal, etc. must be filed with the Building Inspector for approval and issuance of a permit.
13. Certification that all taxes, bills and fees due the Town of Avon are paid in full.

RESIDENTIAL PERMITS – NEW, ALTERATIONS AND ADDITIONS

1. Application and accompanying documents filled out COMPLETELY.
2. All plans must be certified by designer to be in compliance with 780CMR 8th edition.
3. Endorsements of other Boards may be required by Building Inspector.
4. Energy code calculations (See www.energycode.gov), 780CMR Amended, and International Energy Conservation Code (IECC)
5. Photocopies of construction supervisor's license (CSL) and Home Improvement Contractor's registration (HIC).
6. Three (3) copies of site and building plans.
7. Certified Plot Plan (2 copies) for all additions and new construction.
8. Certification that all taxes, bills and fees due the Town of Avon are paid in full.
9. DIG SAFE number
10. Non Refundable application fee of \$50 must be paid in full with application, permit fee to be determined from attached schedule.

OTHER PERMITS

1. Plot Plan – Two (2) copies – for all pools, sheds, fences, decks and patios.
2. Floor plan – for layout/placement of any alternative energy source.
3. U.L. certificates and manufacturer's installation instructions for heating appliances.
4. Roofing, siding, doors & windows without structural changes do not require plans.
5. All Mechanical Permits require:
 - A. All sheet metal require a separate & distinct application form & permit card
 - B. Energy Code Compliance documents (www.energycodes.gov)
 - C. Appliance Efficiency Rating.
6. All fire alarm and sprinkler work except normal maintenance and testing requires a building permit.
7. Copies of all professional and/or trade licenses required by the state of Massachusetts.

DEMOLITION PERMITS

1. All requirements of 780 CMR 33 must be fulfilled.
2. Certification of disconnect for the following: Gas, Electric, Water, Cable, Telephone from the appropriate utility.
3. Certification that the structure is free of asbestos from a licensed remover.
4. Certification from a licensed exterminator that the structure is free of all rodents.
5. DIG SAFE number.
6. Full completed permit application.
7. Certification that all taxes, bills and fees due the Town of Avon are paid in full.

OCCUPANCY PERMITS

Department sign off sheet must be completed before request.

Temporary Occupancy Permits may be issued for limited periods. Failure to complete all requirements for the permanent Occupancy Permit will incur fines of up to \$100.00 per day per violation.

Industrial, Business and Commercial

1. Two (2) copies of as built plans for building or structure.
2. Architect or engineer affidavit of compliance, construction type and capacity of structure.
3. Contractors affidavit of compliance
4. All final signatures on building permit card (Plumbing, gas, electric, Fire Department).
5. Final grading of topsoil and seeded lawn with erosion preventative must be completed.
6. Letter of Compliance from Conservation Commission.
7. Certification of compliance from Board of Health for wastewater disposal/treatment and water supply if not on Town water.
8. Payment in full of all taxes, bills & fees to the Town of Avon.
9. Address (numbers) must be applied to the structure and be clearly visible from the street.

RESIDENTIAL

1. As built site plan confirming location of structure on lot.
2. Certification of compliance of wastewater disposal/treatment from Board of Health.
3. Approval of water supply if not on Town water.
4. Letter of compliance (if required) from Conservation Commission.
5. All final signatures on the Building Permit card (Plumbing, gas, electric and Fire Department).
6. Payment in full to the Town of Avon.
7. Copy of smoke & CO detector certificate.
8. Final grading of topsoil and seeded lawn with erosion preventative must be completed.
9. Address (numbers) must be applied to the structure and be clearly visible from the street.

IMPORTANT

1. *All siding permits (wood, vinyl, metal, etc.) application must be accompanied by an electrical permit to remove and replace the electric service.*
2. *All permits which involve any excavation require a Dig Safe number (1-888 "Dig-Safe"/ 1-888- 344-7233) and may require a "trench" permit issued by the Avon Fire Dept applications available at www.avonmass.org .*

I HAVE READ AND UNDERSTAND THE DIRECTIONS ATTACHED.

NAME _____

DATE _____



APPLICATION FOR BUILDING PERMIT TOWN OF AVON

Date: _____

To the INSPECTOR OF BUILDINGS:

The undersigned hereby applies for a permit to: Build Make Alterations Demolish Other _____

1. Address at site: _____

2. Name and Address of Owner: _____
Telephone: _____

3. Name and Address of Contractor: _____
Telephone: _____

4. Construction Supervisor's License No: _____ Home Improvement Cont. Lic. No: _____

5. Type of Construction: **Frame:** Wood Concrete/Steel Brick/Block
Walls: Studs & Plaster Precast Brick/Block
Foundation: Concrete Piles Other _____
Foundation Dimensions: _____ Wide x _____ Deep
Energy Compliance: Score Rescheck Comcheck

6. Number of Stories: _____

7. How is the building occupied: Residential Business Industrial Other _____
If Residential, number of families: _____ If Business, No. of units: _____

8. Lot Size: _____ Frontage: _____
Set Backs: Front _____ Left Side _____ Right Side _____ Back: _____

9. Describe Proposed Work: _____

10. Plans submitted: Yes No Plot Plan: Yes No

11. Estimated Value of Work: \$ _____ (complete worksheet on back)

12. Signature of Owner or Authorized Representative: _____

All work to be performed in accordance with the current & amended Massachusetts State Building Code 780CMR.

Print Name

OFFICIAL USE ONLY

Approved By: _____ Date: _____ Permit No.: _____ Fee: _____

Map: _____ Block: _____ Lot: _____ Zoning District: _____ RETX _____ Water _____ Other _____

SPECIAL REQUIREMENTS: As Built Plans: _____ Foundation Only: _____ Completed Structure: _____

Certificate of Occupancy: Is Is not required before premises maybe occupied Certificate of Occup. Fee: _____

REQUIRED INSPECTIONS

Excavation: _____ Insulation: _____ Electrical: Rough: _____ Final: _____

Foundation: _____ Final: _____ Plumbing: Rough: _____ Final: _____

Rough Frame: _____ Gas Fitting: Rough: _____ Final: _____

**How to calculate the "estimated value of work"
Line 11 of the Building Permit Application**

- | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Site Work:</p> <ul style="list-style-type: none"> Excavation Septic Installation Back fill & rough grade Finish grade, loam & seed Plantings Sidewalks & Driveways <p>Concrete & Masonry:</p> <ul style="list-style-type: none"> Footings & foundation Concrete slabs Masonry fireplaces & chimneys <p>Frame:</p> <ul style="list-style-type: none"> Walls, interior & exterior Floors Ceilings Roofs, including shingles, etc <p>Misc.</p> <ul style="list-style-type: none"> Include such things as: Tree cutting & stump removal All communication wiring (removal of excavated materials: boulders, trash, excess earth, etc.) Special site work, drainage, retention, detention areas, wetland replacement Hay bales, silt fence, fences, et al. | <p>Exterior:</p> <ul style="list-style-type: none"> Siding & trim <p>Interior:</p> <ul style="list-style-type: none"> Doors Moldings & trim Stairs & railings Floor & coverings Paint & stain Kitchen – cabinets, counters, appliances <p>Plumbing & Gas:</p> <ul style="list-style-type: none"> All Fixtures All Piping <p>Electrical:</p> <ul style="list-style-type: none"> All line voltage wiring All fixtures All low voltage wiring All fixtures All communication wiring |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

All the above figures must include labor and materials.
For homeowners doing their own work to calculate the labor it should be at a rate of \$20.00 per hour.

Submit this completed worksheet with all building permit applications.

Item	Estimated Costs: (Labor and Materials)	
1. Building	\$	
2. Electrical	\$	
3. Plumbing	\$	
4. Mechanical (HVAC)	\$	
5. Mechanical (Fire Suppression)	\$	
6. Total Project Cost:	\$	

TOWN OF AVON

IX HOMEOWNER LICENSE EXEMPTION

Supplement # 1

The current exemption for "homeowner" was extended to include owner-occupied dwellings of two units or less to allow such homeowners to engage an individual for hire who does not possess license, provided that the owner acts as a supervisor. (State Building Code Section 109 1.1)

DEFINITION OF HOMEOWNER

Person(s) who own a parcel of land on which he/she reside, on which there is, or is intended to be a one or two family dwelling attached or detached structures accessory to such use and/or farm structures. A person who constructs more than one home in a two-year period shall not be considered a homeowner. Such "Homeowner" shall submit to the Building Official that he/she shall be responsible for all such work performed under the building permit. (Section 109 1.1)

The undersigned homeowner assumes responsibility for compliance with the State Building Code and other applicable codes, ordinance, rules and regulations, and will comply with the Town of Avon's Building Department minimum inspections procedures and requirements

HOMEOWNERS SIGNATURE: _____

X CONSTRUCTION DEBRIS DISPOSAL

Supplement # 2

In accordance with provisions of Massachusetts General Law C40, S54 debris resulting from this work shall be disposed of in a property licensed solid waste disposal facility as defined by Massachusetts General Law C11, S150A

The debris will be disposed of in:

_____ (Location of Facility)

Signature of Permit Applicant

Date

XI HOME IMPROVEMENT CONTRACTOR LAW AFFIDAVIT

(Residential Use Only) Supplement to Permit Application

Supplement # 3

MGL C.142A requires that the "reconstruction, alteration, renovation, repair modernization, conversion, improvement, removal, demolition or construction of an addition to any pre-existing owner-occupied building containing at least one but not more than four dwelling units or two structures which are adjacent to such residence of building" be conducted by registered contractors, with certain exceptions along with other requirements.

Type of Work: _____ Est. Cost _____

Address of Work: _____

Owners Name: _____ Date of Permit Application: _____

I hereby certify that Registration is not required for the following reason(s)

___ Work excluded by law ___ Job under \$1,000 ___ Building not owner-occupied ___ Owner obtaining own permit

Other (specify) _____

Notice is hereby given that:

OWNERS OBTAINING THEIR OWN PERMIT OR EMPLOYING UNREGISTERED CONTRACTORS FOR APPLICABLE HOME IMPROVEMENT WORK DO NOT HAVE ACCESS TO THE ARBITRATION PROGRAM OF GUARANTY FUND UNDER MGL C.142A

Sign under penalties of perjury

I hereby apply for a permit as the agent of the owner

Date

Contractor Signature

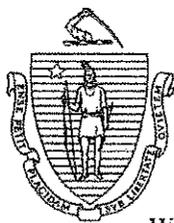
Registration No.

OR:

Notwithstanding the above notice. I hereby apply for a permit as owner of the above property:

Date

Owner Signature



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 #: _____

<p>Are you an employer? Check the appropriate box:</p> <p>1. <input type="checkbox"/> I am an employer with _____ employees (full and/or part-time).*</p> <p>2. <input type="checkbox"/> I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required.]</p> <p>3. <input type="checkbox"/> I am a homeowner doing all work myself. [No workers' comp. insurance required.] †</p> <p>4. <input type="checkbox"/> 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.</p> <p>5. <input type="checkbox"/> 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. ‡</p> <p>6. <input type="checkbox"/> 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.]</p>	<p>Type of project (required):</p> <p>7. <input type="checkbox"/> New construction</p> <p>8. <input type="checkbox"/> Remodeling</p> <p>9. <input type="checkbox"/> Demolition</p> <p>10. <input type="checkbox"/> Building addition</p> <p>11. <input type="checkbox"/> Electrical repairs or additions</p> <p>12. <input type="checkbox"/> Plumbing repairs or additions</p> <p>13. <input type="checkbox"/> Roof repairs</p> <p>14. <input type="checkbox"/> Other _____</p>
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*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 #: _____

<i>Official use only. Do not write in this area, to be completed by city or town official.</i>	
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 #: _____

Information and Instructions

Massachusetts General Laws chapter 152 requires all employers to provide workers' compensation for their employees. Pursuant to this statute, an *employee* is defined as "...every person in the service of another under any contract of hire, express or implied, oral or written."

An *employer* is defined as "an individual, partnership, association, corporation or other legal entity, or any two or more of the foregoing engaged in a joint enterprise, and including the legal representatives of a deceased employer, or the receiver or trustee of an individual, partnership, association or other legal entity, employing employees. However the owner of a dwelling house having not more than three apartments and who resides therein, or the occupant of the dwelling house of another who employs persons to do maintenance, construction or repair work on such dwelling house or on the grounds or building appurtenant thereto shall not because of such employment be deemed to be an employer."

MGL chapter 152, §25C(6) also states that "**every state or local licensing agency shall withhold the issuance or renewal of a license or permit to operate a business or to construct buildings in the commonwealth for any applicant who has not produced acceptable evidence of compliance with the insurance coverage required.**"

Additionally, MGL chapter 152, §25C(7) states "Neither the commonwealth nor any of its political subdivisions shall enter into any contract for the performance of public work until acceptable evidence of compliance with the insurance requirements of this chapter have been presented to the contracting authority."

Applicants

Please fill out the workers' compensation affidavit completely, by checking the boxes that apply to your situation and, if necessary, supply sub-contractor(s) name(s), address(es) and phone number(s) along with their certificate(s) of insurance. Limited Liability Companies (LLC) or Limited Liability Partnerships (LLP) with no employees other than the members or partners, are not required to carry workers' compensation insurance. If an LLC or LLP does have employees, a policy is required. Be advised that this affidavit may be submitted to the Department of Industrial Accidents for confirmation of insurance coverage. **Also be sure to sign and date the affidavit.** The affidavit should be returned to the city or town that the application for the permit or license is being requested, **not** the Department of Industrial Accidents. Should you have any questions regarding the law or if you are required to obtain a workers' compensation policy, please call the Department at the number listed below. Self-insured companies should enter their self-insurance license number on the appropriate line.

City or Town Officials

Please be sure that the affidavit is complete and printed legibly. The Department has provided a space at the bottom of the affidavit for you to fill out in the event the Office of Investigations has to contact you regarding the applicant. Please be sure to fill in the permit/license number which will be used as a reference number. In addition, an applicant that must submit multiple permit/license applications in any given year, need only submit one affidavit indicating current policy information (if necessary) and under "Job Site Address" the applicant should write "all locations in _____ (city or town)." A copy of the affidavit that has been officially stamped or marked by the city or town may be provided to the applicant as proof that a valid affidavit is on file for future permits or licenses. A new affidavit must be filled out each year. Where a home owner or citizen is obtaining a license or permit not related to any business or commercial venture (i.e. a dog license or permit to burn leaves etc.) said person is NOT required to complete this affidavit.

The Department's address, telephone and fax number:

The Commonwealth of Massachusetts
Department of Industrial Accidents
1 Congress Street, Suite 100
Boston, MA 02114-2017

Tel. # 617-727-4900 ext. 7406 or 1-877-MASSAFE

Fax # 617-727-7749

www.mass.gov/dia