



TOWN OF HAMILTON BUILDING PERMIT APPLICATION
ROOFING-SIDING-STOVES
WEATHERIZATION & INSULATION
WINDOWS-CHIMNEYS

This Application is not a permit. The completed application must be submitted to the Inspector of Buildings for his examination and plan review.

<i>To be completed by Building Department</i>	
<p>Signature Indicating Approval of the Permit Application by the Town of Hamilton Inspector of Buildings</p> <p>Signature: _____</p> <p>Date: _____</p>	<p>BUILDING PERMIT #: _____</p> <p>FEE PAID: _____ DATE PAID: _____</p> <p>CHECK NUMBER: _____</p> <p><i>Preferable payment: Checks or Money Orders/Cashier's Checks made payable to the Town of Hamilton. Fees for Plumbing & Electrical may be found on separate fee schedules.</i></p>
<i>The following sections to be completed by Applicant</i>	
PROPERTY ADDRESS: _____	
ASSESSMENT INFORMATION: MAP: _____ LOT: _____ ZONING DISTRICT: _____	
<i>(Information may be found at the Assessor's office or on the Town web page: hamiltonma.gov)</i>	
APPLICANT(S) NAME: _____	
<i>(The applicant is the person completing the application)</i>	
<u>OWNER(S) OF RECORD</u>	
OWNER(S) NAME: _____ OWNER(S) NAME: _____	
<u>CONTRACTOR</u>	
COMPANY NAME: _____	
NAME OF PERSON RESPONSIBLE FOR CONSTRUCTION: _____	
PHONE NUMBER OF PERSON RESPONSIBLE FOR CONSTRUCTION: (_____) _____	
CSL LICENSE #: _____ EXPIRATION DATE: _____	
H.I.C. #: _____ EXPIRATION DATE: _____	
Please include copies of your license and your General Liability Insurance Certificate with each application.	
An Owner who obtains a Building Permit to do his/her own work, or an owner who hires an unregistered contractor (not registered in the Home Improvement Contractor (HIC) Program), will not have access to the arbitration program or guaranty fund under MGL c. 142A. Other important information on the HIC Program and Construction Supervisor Licensing (CSL) can be found in 780 CMR Regulations 110.R6 and 110.R5, respectively.	
DISPOSAL OF DEBRIS: _____	
<i>(Dumpster Permit required from Fire Department for over 6 cubic yards -Form to be signed by Fire Department on Town web page or in office)</i>	

TYPE OF PERMIT APPLICATION

(Applicants are only required to complete the section for the proposed work to be done)

STOVES (WOOD/PELLET/GAS STOVES/FIREPLACES)

FEE: \$ 40.00 FOR EACH STOVE

TYPE OF STOVE: _____

MANUFACTURER'S SPEC FOR INSTALLATION ATTACHED TO THIS APPLICATION? ____ YES ____ NO

COST OF STOVE: \$ _____

GAS STOVES WILL REQUIRE A GAS PERMIT TOO

WEATHERIZATION - INSUALTION

FEE: \$10.00 ON THE 1ST \$1,000 OF THE PROJECT COST AND \$5.00 FOR EACH ADDITIONAL \$1,000 OF PROJECT COST; IF LESS THAN \$40.00 THEN FEE IS \$40.00

ESTIMATE OF CONSTRUCTION COST: _____ **SPECS TO BE ATTACHED TO THIS APPLICATION**

DESCRIPTION OF WORK: _____

Does the proposed work require Compliance with the Stretch Code? (Yes/No) _____

If the response was "YES", please complete the Town of Hamilton form regarding HERS Rating/Stretch Code-a copy of the form is attached.

SIDING

FEE: \$10.00 ON THE 1ST \$1,000 OF THE PROJECT COST AND \$5.00 FOR EACH ADDITIONAL \$1,000 OF PROJECT COST; IF LESS THAN \$40.00 THEN FEE IS \$40.00

ESTIMATE OF CONSTRUCTION COST: _____

TYPE OF MATERIAL: _____

STRIPPING EXISTING SIDING?: ____ YES ____ NO INSTALLING INSULATION BOARD?: ____ YES ____ NO

DESCRIPTION OF WORK: _____

Does the proposed work require Compliance with the Stretch Code? (Yes/No) _____

If the response was "YES", please complete the Town of Hamilton form regarding HERS Rating/Stretch Code-a copy of the form is attached.

WINDOWS & DOORS

FEE: \$10.00 ON THE 1ST \$1,000 OF THE PROJECT COST AND \$5.00 FOR EACH ADDITIONAL \$1,000 OF PROJECT COST; IF LESS THAN \$40.00 THEN FEE IS \$40.00

ESTIMATE OF CONSTRUCTION COST: _____

NUMBER OF UNITS BEING INSTALLED: NUMBER OF WINDOWS: _____ NUMBER OF DOORS: _____

REPLACEMENT UNITS ? ____ YES ____ NO NEW INSTALLATIONS? ____ YES ____ NO

U-VALUE _____ DOORS _____ WINDOWS _____

DESCRIPTION OF WORK: _____

Does the proposed work require Compliance with the Stretch Code? (Yes/No) _____

If the response was "YES", please complete the Town of Hamilton form regarding HERS Rating/Stretch Code-a copy of the form is attached.

ROOFING

FEE: \$10.00 ON THE 1ST \$1,000 OF THE PROJECT COST AND \$5.00 FOR EACH ADDITIONAL \$1,000 OF PROJECT COST; IF LESS THAN \$40.00 THEN FEE IS \$40.00

ESTIMATE OF CONSTRUCTION COST: _____

SQUARE FOOTAGE OF ROOFING TO BE DONE: _____

TYPE OF ROOFING MATERIAL: _____

REMOVING EXISTING MATERIAL? ___ YES ___ NO GOING OVER EXISITING ROOF? ___ YES ___ NO

Note: if you are going over existing roof, you must prove that there is only one layer and that the roofing material will meet 100 mph wind load.

DESCRIPTION OF WORK: _____

Does the proposed work require Compliance with the Stretch Code? (Yes/No) _____

If the response was "YES", please complete the Town of Hamilton form regarding HERS Rating/Stretch Code.

A CERTIFICATE OF LIABILITY INSURANCE SHOULD STATE THAT THE COVERAGE IS FOR WORK ON A ROOF

CHIMNEYS

FEE: \$40.00 (MINIMUM FEE)

ESTIMATE OF CONSTRUCTION COST: _____

DESCRIPTION OF WORK: _____

- ✓ CONTRACTOR MUST SUBMIT COPIES OF ALL REQUIRED LICENSES, WORKERS COMPENSATION INSURANCE AFFIDAVIT AND CERTIFICATE OF WORKERS COMP INSURANCE NAMING TOWN OF HAMILTON AS CERTIFICATE HOLDER IF REQUIRED
- ✓ ALL PERMIT APPLICATIONS MUST BE REVIEWED BY THE BULDING INSPECTOR; JOB WEATHER CARDS FOR THE WORK WILL BE AVAILABLE WITHIN 2-5 BUSINESS DAYS
- ✓ IF THE PROPOSED WORK IS FOR A PROPERTY WHICH OBTAINED APPROVAL FOR A VARAINCE, SPECIAL PERMIT OR SITE PLAN REVIEW ADDITIONAL APPROVALS MAY BE REQUIRED. ALL DECISIONS SHOULD BE FILED WITH THE REGISTRY OF DEEDS. PLEASE ATTACH A COPY OF DECISION TO THIS APPLICATION.
- ✓ ALL PERMIT APPLICATIONS FOR PROPOSED WORK FOR PROPERTIES LOCATED IN THE BUSINESS DISTRICT (ZONE B) OR ON ROUTE 1A SHOULD BE APPROVED BY THE TOWN PLANNER
- ✓ APPROVAL BY THE HISTORICAL COMMISSION WILL BE REQUIRED IF THE PROPERTY IS LOCATED IN THE HISTORIC DISTRICT (IN HISTORIC DISTRICT ARE THE FOLLOWING BAY ROAD PROPERTIES NUMBERED: 540,560,563,568 (Partial), 569, Town Hall, 588,589,Cutler Park, 595,598,601,604,605,609,610,613,621,CEMETARY, 624,625,630,638,648,651,670,684,690,700)
- ✓ THE BUILDING INSPECTOR WILL DETERMINE IF OTHER APPROVALS MAY BE REQUIRED FROM TOWN DEPARTMENTS/COMMISSIONS

OWNER(S) AUTHORIZATION

(A copy of a signed contract would be acceptable in place of owners signatures in this section)

I/We _____, _____ as the Owner(s) of the subject property hereby authorize _____ to act on behalf, in all matters relative to work authorized by this Building Permit.

Signature of Owner

Date

Signature of Owner

Date

TO BE SIGNED BY APPLICANT

I, _____, as Owner or Authorized Agent hereby declare that the statements and the information on the foregoing application are true and accurate, to the best of my knowledge and behalf.

Signature of Applicant

Date

Other Required Approvals Determined by the Building Inspector

Department: _____

Planning Department

Historical Commission

Signature: _____

Signature: _____

Signature: _____

Date: _____

Date: _____

Date: _____

Notes

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