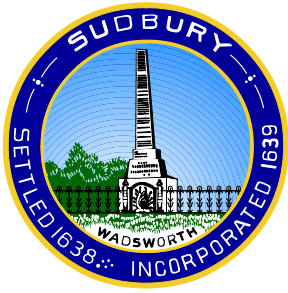


**BUILDING PERMIT APPLICATION:**

Property Street Address \_\_\_\_\_ Lot No. \_\_\_\_\_  
(if new house)



Fill out items 1-13 and refer to the attached descriptions. Do not leave any blank lines.

If not applicable, write NA.

- 1) Driveway Permit No. \_\_\_\_\_
- 2) Bd. of Health Per. No. \_\_\_\_\_
- 3) Fire Protection Plan \_\_\_\_\_
- 4) Energy Compl. Report? \_\_\_\_\_
- 5) Wetlands? \_\_\_\_\_
- 6) Demolition: Built prior to 1940? \_\_\_\_\_
- 7) Stormwater Mgmt. Per. No. \_\_\_\_\_
- 8) Historic Dist. or Scenic Rd? \_\_\_\_\_
- 9) Board of Appeals? \_\_\_\_\_
- 10) Est. **Value** of Work \$ \_\_\_\_\_  
**Fee: \$12/1,000 – single family res. - roundup**  
**\$15/1,000 – multi family & com. - roundup**

11) Description of Work \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<b>For Office use Only</b>
Date Filed _____
Date Issued _____
By: _____
Permit No.: _____
Permit Fee \$ _____

12) Attach Plot Plan showing existing and proposed work.

Property Owner \_\_\_\_\_

Address \_\_\_\_\_

Phone No. (\_\_\_\_) \_\_\_\_\_

E-mail address \_\_\_\_\_

Contractor \_\_\_\_\_

Address \_\_\_\_\_

Phone No. (\_\_\_\_) \_\_\_\_\_

E-mail address \_\_\_\_\_

HIC Registration # \_\_\_\_\_

Owner's Signature (see other side: **Notes 1 & 2**) \_\_\_\_\_

This structure will be constructed under the requirements of The Massachusetts State Building Code and the Zoning bylaws of the Town of Sudbury. I will notify the Building Department when ready for inspections at least 24 hours in advance.

Contractor's Signature \_\_\_\_\_

13) See other side for contractor license information

\*\*\*\*\* FOR OFFICE USE ONLY \*\*\*\*\*

**Required Inspections: Call to schedule 24 hours in advance 978-440-5461**

- |                             |                           |                   |
|-----------------------------|---------------------------|-------------------|
| Bldg Excavation/Steel _____ | Elec. Trench/Ground _____ | Plbg. Ungd. _____ |
| Bldg Foundation _____       | Elec. Meter/Service _____ | Plbg. Rough _____ |
| Bldg Throat _____           | Nstar Auth. No. _____     | Plbg. Final _____ |
| Bldg Rough _____            | Nstar Called _____        | Gas Ungd _____    |
| Bldg Insulation _____       | Rough _____               | Gas Rough _____   |
| Bldg Final _____            | Elec. Final _____         | Gas Final _____   |

**For Certificate of Occupancy on new construction**

- |                         |  |                              |
|-------------------------|--|------------------------------|
| BOH As-Built _____      | Other Documents (Affidavits, ZBA, etc.): _____ | Notify Assessors _____       |
| Final Fire _____        | _____  | Notify Clerk _____           |
| Cert. Plot Plan _____   | _____  | Cert. of Occupancy No. _____ |
| Driveway As-Built _____ | _____  | Issued to: _____             |

1. If this is a new house, or you wish to relocate an existing driveway, obtain a driveway permit from the Engineering Department.
2. If this is a new house, or you are increasing the number of rooms and/or bedrooms, obtain approval from the Board of Health. A septic permit may be required.
3. A fire protection plan is needed for the following: a) construction of a new house; b) if you are increasing the number of bedrooms or substantially altering bedrooms; or c) substantial renovation/addition.
4. All new construction and additions to existing homes require insulation in accordance with an "Energy Compliance Report".
5. If there are wetlands or a river or stream, on or near the property, you may be subject to the Mass. Wetlands Protection Act, Rivers Act, or Sudbury Wetlands Regulations. Consult the Sudbury Conservation Coordinator 978-440-5471.
6. If you intend to demolish any structure or portion of any structure constructed prior to 1940, or if the property is listed in the Old Homes survey of the Sudbury Historic Commission, approval must first be obtained by the Sudbury Historical Commission. For construction dates, consult the Assessor's Office.
7. Stormwater Management Permit may be required by the Planning Board at 978-639-3387 or visit [www.sudbury.ma.us](http://www.sudbury.ma.us) for General Bylaw requirements on stormwater management.
8. Any proposed work in a Historic District must first receive a Certificate of Appropriateness from the Sudbury Historic Districts Commission, 978-639-3387. If this lot is on a Scenic Road, changes cannot be made to stone walls or trees near the roadway without consulting with the Planning Board, 978-639-3387. (see Planning Board - Scenic Roads for a list of specific roads.)
9. If a Zoning Variance or Special Permit is required, provide the Zoning Board of Appeals (ZBA) case number, and a copy of the Board's decision.
10. Value of the work means the estimated market value of the project and the fee is calculated at \$10/1,000 for 1 & 2 family dwellings or \$15/1,000 (or portion thereof) for commercial – Round up to next 1,000. There is a \$40 minimum.
11. When describing the project, list actual names of rooms and spaces added or affected, **not** just "building addition" or "building renovation". Include location of room(s).
12. For projects involving an addition or building footprint change, submit a Plot Plan showing the setback dimensions from adjacent property lines. Plot plans may be available at the Engineering Department 978-440-5421.
13. Attach copies of your current Construction Supervisor's License, Home Improvement Contractor's license, a [Workers' Compensation Insurance Affidavit](#) and a Worker's Comp. Insurance Certificate. We will also require two sets of stamped plans

**Commercial Permits – in addition to the above, the following items may be required:**

- Construction Control Affidavit required if over 35,000 cubic feet.
- Two sets of complete drawings including structural.
- Fire Department review plans and attach copy of their permit.

**Note - In accordance with General Bylaw Art. XX all new construction must have all new utilities placed underground.**

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**13.1 Licensed Construction Supervisor (CSL)**

_____	License Number	_____	Expiration Date
_____	List CSL Type (see below)	_____	
Name of CSL- Holder	Type	Description	
_____	U	Unrestricted (up to 35,000 Cu. Ft.)	
Address	R	Restricted 1&2 Family Dwelling	
_____	M	Masonry Only	
Signature	RC	Residential Roofing Covering	
_____	WS	Residential Window and Siding	
Telephone	SF	Residential Solid Fuel Burning Appliance Installation	
_____	D	Residential Demolition	

**13.2 Registered Home Improvement Contractor (HIC)<sup>2</sup>**

_____	Registration Number
HIC Company Name or HIC Registrant Name	_____
_____	Expiration Date
Address	_____
Signature	Telephone

**WORKERS' COMPENSATION INSURANCE AFFIDAVIT (M.G.L. c. 152. § 25C(6))**

Workers Compensation Insurance affidavit must be completed and submitted with this application. Failure to provide this affidavit will result in the denial of the Issuance of the building permit.

**NOTES:**

1. 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 M.G.L. 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.
2. Has a contract been signed in accordance with HIC requirements? Homeowner Initial: \_\_\_\_\_
3. Two sets of complete drawings required including structural information. Homeowner Initial: \_\_\_\_\_
4. Construction Control Affidavits required if structure is more than 35,000 cubic feet
5. Fire Department must review all commercial projects prior to submission of building permit.
6. **Per General Bylaw Art. XX for all new construction, all new utilities must be placed underground.**

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Contact the Building Department at 978-440-5461 if you have any questions.

Office Hours  
275 Old Lancaster Road

Monday-Friday  
8:00 a.m.-3:00 p.m.