



TOWN OF SUDBURY

Building & Inspections Department
275 Old Lancaster Road, Sudbury, MA 01776

Telephone: 978-440-5461
Fax: 978-440-5404

APPLICATION FOR CERTIFICATE OF INSPECTION

Date _____

Inspection Fee - \$40

In accordance with the provisions of the Massachusetts State Building Code, Section 110.7, I hereby apply for a Certificate of Inspection for the following premises located at

Street & number _____

Name of premises _____

Telephone Number _____

Use Group (A, I-2, I-4 or E, R-1, R-2) _____

Are there any changes to the capacities of assembly rooms or stories? _____
(If yes, please indicate change below.)

Is a license or permit required for the premises by other government agencies? _____
(If yes, please indicate type of license and agency below.)

Signature of person, or authorized agent,
to whom the certificate is to be issued.

Title

This completed form, together with a check made payable to the Town of Sudbury, should be returned to the Building Dept. At that time an inspection date will be arranged. Upon completion of the inspection, the certificate will be mailed to the above address.

Building Dept. Use Only

Inspection Date _____

Certificate Number _____

Expiration Date _____

G:Annual/ci application

Checklist for Certificate of Inspection

Please provide the completed checklist at the time of inspection:

Street address properly posted: Yes No

Use Group (Section 302.1) _____

Type of Construction (Chapter 6) _____

Sprinklered Building: Yes No

Emergency lights all operation: Yes No

Exit signs lighting operational: Yes No

Fire extinguishers properly located and with current inspection tag: Yes No

Occupant Load per story posted: Yes No

Most recent fire alarm system inspection/test documented date.

Location of battery back-up must be provided.