

# Building Permit Application

Massachusetts State Building Code, 780 CMR, 9<sup>th</sup> Edition



## TOWN OF TRURO

Building Department

24 Town Hall Rd.

PO Box 2030

Truro, MA 02666

Fax (508) 349-5508

Tel (508) 349-7004 x131

Permit #:	Fee: \$50 Application Fee
	Fee:

### SITE INFORMATION

Project Site:

Assessors Map & Parcel:

Zoning District:

Outside Flood Zone

Inside Flood Zone – Specify:

Setbacks:

Front:

Left Side:

Right Side:

Rear:

Lot Area (sq. ft.)

Frontage:

Water Supply:

Private

Public

Subject to Policy 28: Curb Cut? **Y N**

**If Yes, please attach a copy of the approval to this application.**

SUBJECT TO NHESP/MESA REVIEW?  Y  N

\* IF YES, PLEASE ATTACH A COPY OF THE APPROVAL.

### PROPERTY OWNERSHIP

Owner of Record:

Mailing Address:

Phone:

E-mail:

### Property Owner Authorization

Signature:

Date:

### PROJECT INFORMATION

1 & 2 Family Home

Commercial / Other than 1 & 2 Family Home\*

Change of Use

DEMO - Subject to Chapter VI: Historic Properties Bylaw? **Y N**

**\* BUILDINGS IN EXCESS OF 35,000 CU. FT. MUST MEET CONTROL CONSTRUCTION REGULATIONS (780 CMR 116). ADDENDUM TO PERMIT APPLICATION AVAILABLE IN BUILDING DEPARTMENT.**

New Dwelling: # of units \_\_\_\_\_

Commercial Building

Addition

Alteration

Mechanical

Accessory Structure: (type) \_\_\_\_\_

Other: \_\_\_\_\_

Detailed Description of Proposed Work: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

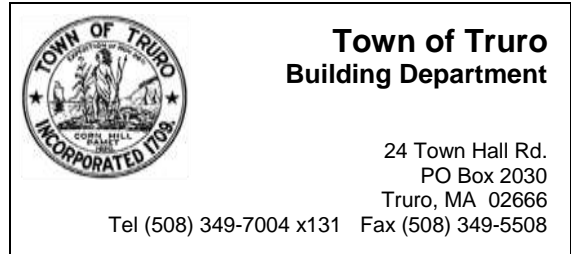
\_\_\_\_\_

\_\_\_\_\_

Estimated Construction Cost:		Debris Disposal: (Landfill or Company Name)	
Floor Area: (Proposed Work Only)		Basement: <input type="checkbox"/> unfinished _____ <input type="checkbox"/> finished _____	
1 <sup>st</sup> flr:	2 <sup>nd</sup> flr:	Porch/Deck:	Other:
#fireplaces:	#chimneys:	#bathrooms: existing _____ proposed _____	
#bedrooms: existing _____ proposed _____			
Type of Heating System:		Type of Cooling System:	
<b>CONTRACTOR INFORMATION*</b>			
*HOMEOWNER'S AFFIDAVIT REQUIRED IF OWNERS ARE DOING THEIR OWN WORK (RESIDENTIAL PROJECTS ONLY)			
Contractor Name:			
Address:			
Phone:		Email:	
CSL#:		HIC #	
<b>OFFICE USE</b>			
<b>HEALTH/CONSERVATION AGENT Review</b> _____			
_____			
_____			
_____			
Signature:		Date:	
<b>Other Comments:</b> _____			
_____			
_____			
<b>BUILDING COMMISSIONER Review &amp; Approval:</b> _____			
_____			
_____			
Signature:		Issuance Date:	

# BUILDING PERMIT APPLICATION DOCUMENT CHECKLIST

This checklist is part of the permit application and must be completed. If not completed the application may be considered incomplete and cause the permit to be denied.



Please note that marked-up archival drawings do not constitute acceptable documents for permitting purposes.

## **One and/or Two Family Home**

- Completed application form
- 1 copy original site plan showing building setbacks and grades.
- 2 (min.) copies building plans – One can be full size if greater than 11 x 17. One must be no greater than 11 x 17 for department filing. Electronic version is acceptable, in addition.

Drawings indicating all relevant information including but not limited to:

- Fully dimensioned foundation, floor and structural plans;
  - Building elevations showing finish materials and critical dimensions;
  - Building/wall sections describing building construction, energy related details and showing critical vertical dimensions.
- Smoke, CO and heat detectors must be shown.
  - Door and window information demonstrating conformance with minimum room and dwelling egress and emergency escape.
  - Exterior window and door information demonstrating conformance with light, ventilation and energy requirements.
  - Location and design of any required fire separation assemblies.

- All structural conditions noted on plans – braced wall lines indicated and analysis shown and/or engineered solution with registered design professional's certification and/or other prescriptive solution allowed by Code.
- 1 copy Energy Code compliance documents (check only one below)
  - HERS/performance rating document – new construction
  - ResCheck (2015 MA) – additions/alterations- per 2015 IECC R502 & 503
  - Prescriptive – values shown on plans – see 2015 IECC table R402.1.2 and other req's.
- Photocopy of CSL and HIC (if applicable) shown on application form
- Worker's Compensation Insurance Affidavit and copy of current certificate of insurance
- Homeowner's License Exemption (if qualified and there is no CSL)
- Copy of recorded approvals from local regulatory boards
- If street access is required and property is on a Town road, copy of Curb Cut approval from the Board of Selectmen

**For applications for Modular and other than 1&2 Family Structures see Checklist on next page.**

- Modular Home** (Homeowner license exemption not allowed)
  - 2 copies of foundation plan
  - Approved plans by MA Board of Building Regulations & Standards with evidence of 3<sup>rd</sup> party inspection
  - Manufacturer's certification of installer/set crew.
  
- Structures Other than 1 & 2 Family Home**
  - Completed Application form
  - Stamp and signature of registered design professional
  - 2 (min.) copies building plans – One can be full size if greater than 11 x 17. One must be no greater than 11 x 17 for filing. Electronic version is acceptable, in addition. Drawings must indicate all relevant information including but not limited to: Fully dimensioned foundation, floor and structural plans; fire separation assemblies; door, window and room finish schedules; building elevations with critical dimensions; building/wall sections describing building construction and energy related details and showing critical vertical dimensions.
  - COMcheck Envelope, Lighting and Mechanical Compliance Certificates and Plan Review Inspection Checklist for the purposes of demonstrating compliance with the energy code.
  - Construction Control Document(s)
  - Tier 1 Fire Protection System document per section 902.2.1
  - Code analysis indicating (but not limited to) all use groups, construction types, allowable areas, fire separations, egress paths and distances. This analysis can be part of drawing set.
  - Contractor credentials
  - Worker's Compensation Insurance Affidavit and copy of current certificate of insurance
  - Recorded copy of any local regulatory board approvals
  - If modular construction see items above

**Notes:**



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 #: \_\_\_\_\_

**Are you an employer? Check the appropriate box:**

- 1.  I am an employer with \_\_\_\_\_ employees (full and/or part-time).\*
- 2.  I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required.]
- 3.  I am a homeowner doing all work myself. [No workers' comp. insurance required.] †
- 4.  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.
- 5.  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. ‡
- 6.  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.]

**Type of project (required):**

- 7.  New construction
- 8.  Remodeling
- 9.  Demolition
- 10.  Building addition
- 11.  Electrical repairs or additions
- 12.  Plumbing repairs or additions
- 13.  Roof repairs
- 14.  Other \_\_\_\_\_

\*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 #: \_\_\_\_\_

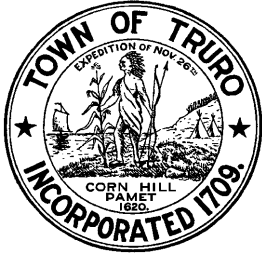
**Official use only. Do not write in this area, to be completed by city or town official.**

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 #: \_\_\_\_\_



***Town of Truro***  
***Building Department***  
***P.O. Box 2030***  
***Truro, Massachusetts 02666***  
***Phone:(508)349-7004 Ext. 131; Fax:(508)349-5508***

At a duly held public hearing conducted by the Truro Board of Selectmen on Tuesday, February 14, 2023, the board unanimously approved the following building permit application fee schedule. The fee schedule will take effect on February 15, 2023.

**BUILDING PERMITS**

**Residential**

Application Review Fee (all full building permits)	\$50.00
New Construction	\$0.65 per sq. ft.
Alteration	\$0.50 per sq. ft.
Other Accessory Structures (over 200 sq. ft.) & Decks	\$0.40 per sq. ft.
Foundation <b>only</b>	\$50 fee plus \$0.25 per linear ft.
Sustaining/Retaining wall	\$50 fee plus \$0.25 per linear ft.
Express Permit	\$50 fee per check box
(Tents greater than 400 sq ft.)	\$100.00
Pools /Solar	1% of construction costs + application fee
Signs	\$50 fee
Beach Stairs	\$50 fee
Mechanical/Sheet Metal	1% of construction cost
Demolition	\$50.00 less than 300 sq. ft \$150.00 301 sq. ft & greater
Certificate of Occupancy	\$75.00
Replacement of Lost Permit Card	\$75.00

**Commercial** (Anything other than 1-2 family, R-4 & R-5)

Apply residential fees and add 15%

**Re-inspection and/or Extra Inspection Fees**

Residential	\$75.00
Commercial	\$100.00
Emergency Inspection/After Hours or Weekends	\$150.00

\*\* For any work with out a permit, the fees will be tripled.

\*\*\* Any work not covered by the above fee schedule will be assessed a fee of 1% of construction cost

\*\*\*\* Fees are non-refundable once permit has been issued.