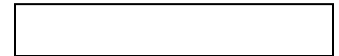


COMMONWEALTH OF
MASSACHUSETTS



TOWN OF BOURNE

APPLICATION FOR CERTIFICATE OF INSPECTION

Date: _____ (X) Fee Required \$ 40
() No Fee Required

In accordance with the Massachusetts State Building Code, Section 106 and/or Chapter 304 of the Acts of 2004, I hereby apply for a Certificate of Inspection for the below named premises located at the following address:

Business Name: _____

Business Address: _____

Mailing Address: _____

Purpose of Premises: _____

Contact Person: _____ Phone: _____

Email: _____

Signature of person to whom certificate is issued or authorized agent:

INSTRUCTIONS:

1. Make checks payable to the Town of Bourne
2. Return this application with your check by **Dec. 31, 2014** to:

**Town of Bourne Building Dept.
24 Perry Ave, Buzzards Bay MA 02532**

Does this building have a sprinkler system: Yes _____ No _____

The building official shall be notified within ten (10) days of any change in the above information