Permit # _____

TOWN OF BOURNE
APPLICATION FOR MECHANICAL PERMIT

24 Perry Ave, Buzzards Bay, MA
Ph: 508-759-0600 ext. 1512 Fax: 508-759-0611

Mechanical Permits are inspected by the Building Inspector and/or the Plumbing Inspector

Is this application in conjunction with a building permit? YES # _____ NO _____

Property Address: _____ Owner of Record: _____

Assessors Map #_____Lot #_____ Type of Occupancy: _____

New: _____ Renovation: _____ Replacement: _____ Plans Submitted: Yes_____ No _____

Installing Company Name: _____

Company Street Address: _____ City: _____ Zip: _____

Company Phone Number: _____ **Estimated Cost:** $_____

Indicate total number of units in the applicable box below

M 1 & 2 Family	Basement	1st Floor	2nd Floor	3rd Floor	Roof	Ground*
Air Handling/Hydro Units						
Evaporative & Refrigeration Coolers						
Heat Pumps						
Range Hoods Vented to Exterior						
Central Air Conditioners						
Combustion Air /Ventilation Fans						
Energy Recovery Ventilators						
Furnaces- Oil or gas (circle)						
Other:						

Basic Building Code Commercial	Basement	1st Floor	2nd Floor	3rd Floor	Roof*	Ground*
Generators						
Draft Inducers Oil fired Equip						
Kitchen Vent & Exhaust Equipment						
Pool Heater						
Process Piping						
Roof Top Units						
Radiant Heat						
Hydro Air Systems						
Central Air Conditioners						
Other:						

I certify that I have the authority to make the foregoing application and that all of the information I have submitted (or entered) in the above application is true and accurate to the best of my knowledge, information and belief, and that all mechanical work and installations performed under the permit issued for this application will be in compliance with all pertinent provisions of the Massachusetts State Building Code, the International Mechanical Code, and all laws/bylaws/regulations of the Town of Bourne: **Workers' Compensation Insurance Affidavit required for all mechanical submissions**

_____ _____ _____ _____
Signature: Print Name: Type of License: License #:

Fee:

Revised 8/12/15 ATG