

ATTACHMENT G

REJECTED BUILDING PERMIT

**IX. HOMEOWNER LICENSE EXEMPTION**

**Supplement #1**

The current exemption for "Homeowner" was intended to include unoccupied dwellings of one unit of less and to allow such homeowner to engage an individual for hire who does not possess a license, provided that the owner acts as supervisor. (See Building Code Section 110.2)

**DEFINITION OF HOMEOWNER:**

Person(s) who own a parcel of land on which he/she resides or he/she intends to reside, on which there is, or is intended to be, a one to one family dwelling, attached or detached structures accessory to such use and for farm structures. A person who contributes more than one month in a calendar period shall not be considered a homeowner. Such "homeowner" shall submit to the Building Official, on a form acceptable to the Building Official, the fee(s) which he is responsible for all such work performed under the building permit. (Section 110.3)

The undersigned Homeowner assumes responsibility for compliance with the State Building Code and other applicable codes, ordinances, rules and regulations, and will comply with the City of New Bedford Building Department minimum inspection procedures and requirements.

HOMEOWNERS SIGNATURE \_\_\_\_\_

**X. CONSTRUCTION DEBRIS DISPOSAL**

**Supplement #2**

In accordance with provisions of Massachusetts General Law C40, 55A, debris resulting from this work shall be disposed of in a properly licensed solid waste disposal facility as defined by Massachusetts General Law C41A, §150A.

The debris will be disposed of in: W/A (Location of Facility)

Signature of Permit Applicant \_\_\_\_\_

Date \_\_\_\_\_

**XI. HOME IMPROVEMENT CONTRACTOR LAW AFFIDAVIT**

(Residential Use Only) Supplement to Permit Application

**Supplement #3**

M.G.L. 142A requires that the "reconstruction, alteration, renovation, repair, modification, conversion, improvement, removal, demolition, or construction of an addition to any pre-existing owner-occupied building containing at least one but not more than three one dwelling units, or to structures which are adjacent to such residence or building" be conducted by registered contractors, with certain exceptions, along with other requirements.

Type of Work: TEAR DOWN & REBUILD Sec. Code: 8124.030

Address of Work: 1032 LEROY STREET

Owner Name: JOE TRONER Date of Permit Application: 4/27/15

I hereby certify that: Registration is not required for the following reason(s):

\_\_\_\_\_ Work excluded by law \_\_\_\_\_ Job under \$1,000 \_\_\_\_\_ Building not owner-occupied \_\_\_\_\_ Owner obtaining own permit

Other (specify): \_\_\_\_\_

Notice is hereby given that:

OWNERS OBTAINING THEIR OWN PERMIT OR EMPLOYING UNREGISTERED CONTRACTORS FOR APPLICABLE WORKS WITHOUT PAYMENT WILL NOT HAVE ACCESS TO THE ARBITRATION PROGRAM OF GUARANTY FUND UNDER M.G.L. 142A.

signed under penalties of perjury.

I hereby apply for a permit as the agent of the owner:

Date: 4/27/15 Contractor Signature: [Signature] Registration No.: PE # 411817

Notwithstanding the above notice, I hereby apply for a permit as the owner of the above property.

Date \_\_\_\_\_ Owner Signature \_\_\_\_\_

**XII. BUILDING COMMISSIONERS REVIEW COMMENTS AND CONDITIONS**

C. Building Permit Rejected  SPECIAL PERMIT ZBA Fee \_\_\_\_\_  
 Reason For Rejection: SEE ATTACHMENTS Permit # \_\_\_\_\_

Comments and Conditions:

Signed: [Signature] Date: \_\_\_\_\_ 20\_\_\_\_  
 Title: Building Commissioner

Not valid unless signed (not stamped) by Building Commissioner.



Building Department  
Application for Building Permit

FOR BUILDING DEPT. USE

DATE RECEIVED: 12/17/75  
ISSUED BY: [Signature]

IMPORTANT - COMPLETE ALL ITEMS - PRINT OR TYPE - WHERE APPLICABLE - PRINT

Permit No. \_\_\_\_\_  
Completion Date \_\_\_\_\_

APPLICANT: MORTON...  
ADDRESS: ACUSHNET AVE  
CROSS STREET: RA  
ACCEPTED STREET: YES

II. TYPE AND COST OF BUILDING - All applicants complete this section. PRINT

A. TYPE OF IMPROVEMENT

1 <input checked="" type="checkbox"/> New Building	18 <input type="checkbox"/> Amusement, recreational
2 <input type="checkbox"/> Addition (residential, school, hospital, etc.)	19 <input checked="" type="checkbox"/> Church, other religious
3 <input type="checkbox"/> Addition (commercial, industrial, etc.)	20 <input type="checkbox"/> Hospital
4 <input checked="" type="checkbox"/> Repair, improvement	21 <input type="checkbox"/> Parking garage
5 <input type="checkbox"/> Demolition (residential, school, hospital, etc.)	22 <input type="checkbox"/> Service station, repair garage
6 <input checked="" type="checkbox"/> Moving (residential)	23 <input type="checkbox"/> Hospital, institutional
7 <input type="checkbox"/> Foundation only	24 <input type="checkbox"/> Office, bank, professional
	25 <input type="checkbox"/> Public utility
	26 <input type="checkbox"/> School, library, other educational
	27 <input type="checkbox"/> Store, mercantile
	28 <input type="checkbox"/> Tank, tower
	29 <input type="checkbox"/> Funeral home
	30 <input type="checkbox"/> Food establishment
	31 <input type="checkbox"/> Other - Specify _____

TEAR DOWN  
REBUILD

B. OWNERSHIP

1  Private (individual, corporation, nonprofit institution, etc.)

2  Public (Federal, State, or local government)

C. COST

10. Cost of construction to be included but not included in the above cost:

a. Electrical: 10,000

b. Plumbing: 10,000

c. Heating, air conditioning: 8,000

d. Other (elevator, etc.):

11. TOTAL VALUE OF CONSTRUCTION: 150,000

12. TOTAL ASSESSED BLDG. VALUE: 24,000

III. SELECTED CHARACTERISTICS OF BUILDING - For description, complete only parts G, H & I. For details, complete E through L.

E. PRINCIPAL TYPE OF FRAME

33  Masonry (wall bearing)

34  Wood frame

35  Structural steel

36  Reinforced concrete

37  Other - Specify \_\_\_\_\_

F. PRINCIPAL TYPE OF HEATING FUEL

38  Gas

39  Oil

40  Electricity

41  Coal

42  Other - Specify \_\_\_\_\_

Area of floor	2
Area of roof	28.5
Area of exterior walls	1440
Area of interior partitions	24
Area of floor joists	38
Area of roof joists	1548
Area of floor joists	462
Area of roof joists	30
Area of floor joists	1063
Area of roof joists	5316
Area of floor joists	13212
Area of roof joists	3274
Area of floor joists	161
Area of roof joists	1271
Area of floor joists	161

**OTHER APPLICABLE REVIEWS**

**K. FLOODPLAIN**

Is location within flood hazard area? yes  no  
 If yes, zone: \_\_\_\_\_ and base elevation \_\_\_\_\_

**L. WETLANDS PROTECTION**

Is location subject to flooding? NO  
 Is location part of a known wetland? NO  
 Has local conservation commission reviewed this site? NO

**IV. IDENTIFICATION - ALL APPLICANTS - PLEASE PRINT**

OWNER OR LESSEE NAME	MAILING ADDRESS	ZIP CODE	TELEPHONE NO.
Joe Trottier	25 BAREND'S WAY MIDDLEBORO, MA	02346	508-292-8606
CONTRACTOR NAME	MAILING ADDRESS	ZIP CODE	TELEPHONE NO.
		LICENSE #	
ENGINEER		HOME IMP #	
ARCHITECT NAME	MAILING ADDRESS	ZIP CODE	TELEPHONE NO.
JC ENGINEERING, INC	2854 CRAWFORD HWY	LICENSE # 41807	508-273-0377
John L Churchill SR PE PLS	EAST WAREHAM MA	02538	774-263-0001 cell
SIGNATURE OF OWNER	APPLICANT SIGNATURE	DATE	
	<i>[Signature]</i>	4/27/15	

Omission of reference to any provision shall not nullify any requirement of this code nor exempt any structure from such requirement.

The applicants understands and warrant that they will comply with all pertinent federal and state statutes, local ordinances and all federal, state, and local regulations, including those of the Architectural Barriers board, Department of Environmental Protection Agency and may be forwarded for review to all pertinent local city agencies which may express specific concerns. It is understood that the issuance of a permit shall not serve as an acceptance or acknowledgment of compliance nor exempt any structure from such requirement. The permit shall be a license to proceed with the work and shall not be construed as authority to violate, cancel, or set aside any of the provisions of the State Building Code or local code of ordinances, except as specifically stipulated by modification or legally granted variation in accordance with Section 122.0 of State Building Code or local code of ordinances.

I have read the above and sign under pain and penalty of perjury as to the truth of all of the information and statements contained in sections I through IV of this application.

*[Signature]*  
 Applicant's Signature      Address: 2854 Crawford Hwy      City: EAST WAREHAM MA

V. OTHER JURISDICTION APPROVALS AND NOTIFICATION

APPROVAL	CHECK	DATE OBTAINED	BY
Electrical			
Plumbing			
Fire Department			
Water			
Planning			
Conservation			
Public Works			
Health			
Licensing			
Other			

VI. ZONING REVIEW

DISTRICT: RA USE: SINGLE FAMILY  
 FRONTAGE: 46.3' (EX) 75' REQ LOT SIZE: 5,376 S.F. 8,000 REQ  
 SETBACKS: PROPOSED 10' (12' REQ)  
 FRONT: 20' REQ 38.4' LEFT SIDE: 12.7' REQ RIGHT SIDE: 10.1' REQ REAR: 30.1' REQ  
 PERCENTAGE OF LOT COVERAGE PRIMARY BUILDING 13.4%

VII. VARIANCE HISTORY

VIII. WORKER'S COMPENSATION INSURANCE AFFIDAVIT

I, NOT APPLYING FOR BUILDING PERMIT  
 (licensee/permitted) with a principal place of business/residence at:

(City/State/Zip) do hereby certify, under the pains and penalties of perjury, that:  
 I am an employer providing worker's compensation coverage for my employees working on this job. AT THIS TIME

Insurance Company \_\_\_\_\_ Policy Number \_\_\_\_\_  
 I am a sole proprietor and have no one working for me.  
 I am a sole proprietor, general contractor, or homeowner and have hired the contractors listed below who have the following worker's compensation insurance policies:

_____ Name of contractor	_____ Insurance Company/policy number
_____ Name of contractor	_____ Insurance Company/policy number

I am a homeowner performing all the work myself.

NOTE: Please be aware that while homeowners who employ persons to do maintenance, construction or repair work on a dwelling of not more than three units in which the homeowner also resides or on the grounds appurtenant thereto are not generally considered to be employers under the Workers' Compensation Act (GL, C. 152, sect. 1(5)), application by a homeowner for a license or permit may evidence the legal status of an employer under the Workers' Compensation Act.

I understand that a copy of this statement will be forwarded to the Department of Industrial Accidents' Office of Insurance for coverage verification and that failure to secure coverage as required under Section 25A of MGL 152 can lead to the imposition of criminal penalties consisting of a fine of up to \$1500.00 and/or imprisonment of up to one year and civil penalties in the form of a Stop Work Order and a fine of \$100.00 a day against me.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_