



# TOWN OF CARVER SHEET METAL PERMIT APPLICATION

Permit No. \_\_\_\_\_

Date \_\_\_\_\_

Project Address \_\_\_\_\_ Map \_\_\_\_\_ Lot \_\_\_\_\_ Zone \_\_\_\_\_

Plans Submitted: YES \_\_\_\_\_ NO \_\_\_\_\_

Residential: 1-2 Family \_\_\_\_\_ Multi-family \_\_\_\_\_ Condo/Townhouses \_\_\_\_\_

Commercial: Office \_\_\_\_\_ Retail \_\_\_\_\_ Industrial \_\_\_\_\_ Educational \_\_\_\_\_ Other \_\_\_\_\_

Square footage: Under 10,000 sq ft \_\_\_\_\_ Over 10,000 sq ft \_\_\_\_\_ Number of Stories \_\_\_\_\_

Work to be completed: New Work \_\_\_\_\_ Renovation: \_\_\_\_\_ HVAC \_\_\_\_\_ Air Balancing \_\_\_\_\_

Metal Watershed Roofing \_\_\_\_\_ Kitchen Exhaust System \_\_\_\_\_ Metal Chimney/Vents \_\_\_\_\_

PRINT

**WORK DESCRIPTION** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Owner,** \_\_\_\_\_

	Address	Phone
Print Contractor _____		

	Address	Phone
Photo I.D. Required/ Copy of Photo I.D. attached: YES _____ NO _____		

Business Lic # _____	Applicant Lic # _____
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**J-1/M-1** Unrestricted License \_\_\_\_\_

**J-2/M-2** Restricted to dwellings 3-stories or less and commercial up to 10,000 sq ft/2 stories or less \_\_\_\_\_

**Estimated Cost** \_\_\_\_\_ **Permit Fee** \_\_\_\_\_

## CONTINUE ON BACK

TOWN OFFICIALS FILL OUT	
Board of Health _____	Bldg Dept. _____

# INSURANCE COVERAGE

I have the current Liability insurance policy or its equivalent which meets the requirements of M.G.L. Ch. 112 YES \_\_\_\_\_ NO \_\_\_\_\_

If you have checked YES, indicate the type of coverage by checking the appropriate box below:

A Liability Insurance Policy \_\_\_\_\_ Other Type of Indemnity \_\_\_\_\_ Bond \_\_\_\_\_

**OWNERS'S INSURANCE WAIVER:** I am aware that the licensee does not have the insurance coverage required by Chapter 112 of the Massachusetts General Laws, and that my signature on this permit application waives this requirement.

Check One: \_\_\_\_\_ Owner \_\_\_\_\_ Agent

\_\_\_\_\_  
Signature of Owner or Owner's Agent

I hereby certify that all of the details and information I have submitted (or entered) regarding this application are true and accurate to the best of my knowledge and that all sheet metal work and installations performed under the permit issued for this application will be in compliance with all pertinent provision of the Massachusetts Building Code and Chapter 112 of the General Laws.

\_\_\_\_\_  
Signature of Licensee                      License Number                      Date

**Type of License:**

Master \_\_\_\_\_ Master-Restricted \_\_\_\_\_ Journeyperson \_\_\_\_\_  
Journeyperson-Restricted \_\_\_\_\_ Other \_\_\_\_\_