MASSACHUSETTS UNIFORM APPLICATION FOR A PERMIT TO PERFORM PLUMBING WORK

P

TYPE OR PRINT CLEARLY

CITY SUTTON MA DATE _____ PERMIT # _____

JOBSITE ADDRESS _____ OWNER'S NAME _____

OWNER ADDRESS _____ TEL _____ FAX _____

OCCUPANCY TYPE COMMERCIAL ☐ EDUCATIONAL ☐ RESIDENTIAL ☐

NEW: ☐ RENOVATION: ☐ REPLACEMENT: ☐ PLANS SUBMITTED: YES ☐ NO ☐

FIXTURES ↴ FLOOR→	BSM	1	2	3	4	5	6	7	8	9	10	11	12	13	14
BATHTUB															
CROSS CONNECTION DEVICE															
DEDICATED SPECIAL WASTE SYSTEM															
DEDICATED GAS/OIL/SAND SYSTEM															
DEDICATED GREASE SYSTEM															
DEDICATED GRAY WATER SYSTEM															
DEDICATED WATER RECYCLE SYSTEM															
DISHWASHER															
DRINKING FOUNTAIN															
FOOD DISPOSER															
FLOOR / AREA DRAIN															
INTERCEPTOR (INTERIOR)															
KITCHEN SINK															
LAVATORY															
ROOF DRAIN															
SHOWER STALL															
SERVICE / MOP SINK															
TOILET															
URINAL															
WASHING MACHINE CONNECTION															
WATER HEATER ALL TYPES															
WATER PIPING															
OTHER															

INSURANCE COVERAGE:

I have a current liability insurance policy or its substantial equivalent which meets the requirements of MGL Ch. 142. YES ☐ NO ☐

IF YOU CHECKED YES, PLEASE INDICATE THE TYPE OF COVERAGE BY CHECKING THE APPROPRIATE BOX BELOW

LIABILITY INSURANCE POLICY ☐ OTHER TYPE OF INDEMNITY ☐ BOND ☐

OWNER'S INSURANCE WAIVER: I am aware that the licensee does not have the insurance coverage required by Chapter 142 of the Massachusetts General Laws, and that my signature on this permit application waives this requirement.

CHECK ONE ONLY: OWNER ☐ AGENT ☐

_____
SIGNATURE OF OWNER OR 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 plumbing work and installations performed under the permit issued for this application will be in compliance with all Pertinent provision of the Massachusetts State Plumbing Code and Chapter 142 of the General Laws.

PLUMBER'S NAME _____ LICENSE # _____ _____ SIGNATURE

MP ☐ JP ☐ CORPORATION ☐ # _____ PARTNERSHIP ☐ # _____ LLC ☐ # _____

COMPANY NAME _____ ADDRESS _____

CITY _____ STATE _____ ZIP _____ TEL _____

FAX _____ CELL _____ EMAIL _____

TOWN OF SUTTON

4 UXBRIDGE ROAD

SUTTON, MA 01590

PH: (508) 865-8723 FAX: (508) 865-8721

Plumbing Permit Fee Schedule

ALL INSPECTIONS MUST BE SCHEDULED THROUGH THE BUILDING DEPARTMENT

RESIDENTIAL FEES

New Construction ----------$50.00 + $8.00 per Fixture – Per Housing Unit

Single Fixture ----------$45.00

Code Violations / Re-Inspection Fee / Additional Inspections----------$45.00

Gas Hot Water Heater (Requires paperwork for both Plbg and Gas)---------- $48.00

Plan Review----------$50.00

COMMERCIAL/ INDUSTRIAL FEES

Commercial / Industrial (Includes up to 3 inspections) ----------$100.00 + $10.00 per Fixture – Per Unit

Additional Inspections---------- $45.00 (Paid at time of application)

Single Fixture---------- $50.00

Code Violations/Re-Inspections----------$45.00 (Paid prior to inspection)

Plan Reviews----------$50.00

Please note the following:

- No person shall construct, add to or alter any portion of the plumbing (except to make a repair) until a permit has been filed and all fees are paid.
- Work started without a permit is subject to double the Fee Schedule.
- Permits can be issued only to persons or businesses holding a valid MA Plumbing, Gasfitting or LP Installer License.
- Outdoor Sprinkler Systems must have a Back-Flo Proventor installed by a Licensed Plumber.
- All Filter Systems require installation by Licensed Plumbers