



**Department of Municipal
Licenses and Inspections**
Jeffrey E. Richards, CBO
Director
75 Middle Street
Weymouth, MA 02189-1396
(781)340-5004/Fax (781)335-3283
building@weymouth.ma.us

**Town of Weymouth,
Massachusetts**

Susan M. Kay
Mayor



DATE:
.....
CI NO.:
FEE: \$.....
INSPECTOR APPROVAL:

ZONING - BUILDING - ELECTRICAL - PLUMBING & GAS - LICENSING - WEIGHTS & MEASURES

APPLICATION FOR CERTIFICATE OF INSPECTION

In accordance with the provisions of the Massachusetts State Building Code, Sections 108, 15, I hereby apply for a Certificate of Inspection for the below-named premises located at the following address:

Street and Number: _____ Telephone # _____

Name of Premises: _____

Purpose for which Premises is used: _____

License(s) or Permit(s) required for the premises by other governmental agencies:

| | |
|---------------------------|----------------|
| <u>License or Permit:</u> | <u>Agency:</u> |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Certificate to be Issued to: _____

Address: _____ Telephone # _____

Owner of Record of Building: _____ Telephone # _____

Address: _____ Telephone # _____

Name of Present Holder of Certificate: _____

Name of Agent if any: Address: _____ Telephone # _____

| | | |
|------------------|--------------|-------------|
| SIGNATURE | TITLE | DATE |
|------------------|--------------|-------------|

INSTRUCTIONS:

| | |
|--|---------------------------------------|
| 1. Make Check Payable to: | Town of Weymouth |
| 2. Return Application and check to: | Building Inspection Department |
| | 75 Middle Street |
| | Weymouth, MA 02189 |

PLEASE NOTE:

1. Application form with accompanying fee must be submitted for each building or structure or part thereof to be certified.
2. Application and fee must be received before the certificate will be issued.
3. The building official shall be notified within ten (10) days of any change in the above information.