



TOWN of BROOKLINE
Massachusetts
BUILDING DEPARTMENT

Daniel F. Bennett
Building Commissioner

APPLICATION FOR CERTIFICATE OF INSPECTION
 (Places of Assembly-Schools-Daycare-Camps-Religious Bldgs.-similar uses)

Date: _____

Use Group: _____

IN ACCORDANCE WITH THE PROVISION OF 780 CMR, TABLE 110 THE MASSACHUSETTS STATE BUILDING CODE, 9TH EDITION, AS AMENDED, I HEREBY APPLY FOR A CERTIFICATE OF INSPECTION FOR THE BELOW NAMED PREMISES AT THE FOLLOWING ADDRESS:

NAME OF PREMISES/BUSINESS: _____

USE OF PREMISES/BUSINESS: _____

ADDRESS OF PREMISES/BUSINESS: _____

SEATING CAPACITY / S.F. AREA: _____

CERTIFICATE TO BE ISSUED TO: _____ PHONE: _____

SIGNATURE OF APPLICANT: _____

PRINT NAME: _____

CERTIFICATE MAILING ADDRESS: _____

OWNER OF PREMISES/BUILDING: _____ PHONE: _____

OWNER ADDRESS: _____

LICENSE(S) OR PERMIT(S) REQUIRED FOR THE PREMISES BY OTHER STATE/GOVERNMENT AGENCIES: _____

INSTRUCTIONS:

- Application form with accompanying fee must be submitted for each building or structure or part thereof to be certified. Application and fee must be received prior to the issuance of the certificate
- Submit copies of Annual Fire Alarm and Sprinkler Test Reports.
- All exit signs and emergency lights should be tested to verify they are in good working order. Malfunctioning devices must be repaired immediately. Mechanical & Boiler Rooms should be cleaned and free of debris & combustibles.
- Failure to complete application with required documentation, pay fee and return to the Building Department may result in suspension of licenses and/or enforcement action by the Town of Brookline.
- Return completed application with fee to Brookline Building Department, 333 Washington Street, Brookline, MA 02445.

\$100

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| Fee | Check No. | Receipt No. | Certificate No. | Issued Date | Expiration Date | Approved By |
|-----|-----------|-------------|-----------------|-------------|-----------------|-------------|