

Town of Petersham

William Cantell * Inspector of Buildings

3 South Main Street

Petersham, MA 01366-0486

buildingdept@townofpetersham.org

www.townofpetersham.org

Office 978-724-3586 * Fax 978-724-3501

Office hours are by appointment

Procedure for Obtaining a Building Permit

1. *Get a plot plan from assessors. Andrea can be reached at 978-724-6658.
Email petershamboa@ymail.com
2. Include building plans, workers compensation and debris disposal.
3. If doing the work yourself please sign homeowner warning notice.
4. Meet with the Planning Board. Meetings are as posted or call Fraser Sinclair, Chair at 978-724-3345.
5. Make sure you have a sign-off from Tax Collector that all Real Estate taxes have been paid. 978-724-6620 or petershamtax@verizon.net.
6. *Find out if your building lot is DCR (Department of Conservation & Recreation) affected. You need to know your parcel number. If you have any questions please call DCR @413-961-9583.
7. If you are in the Historic District, you need to meet with the Historic District Commission, contact Robert Clark, Chair at 978-724-3564.
8. If your lot contains any wetlands, you need to contact the Petersham Conservation Commission. They usually meet the 2nd Tuesday of the month or as posted, or call Mike Seitz Chair at 508-439-3864.
9. *The Highway Superintendent, Greg Waid issues driveway permits. He can be reached at 31 South Street, 978-724-3211.
10. * You need to install a well on your property before a building permit can be issued. The Board of Health issues well permits. BOH can be reached at 978-724-0057. Meetings are the 1st and 3rd Thursday of the month at 6:00 p.m., or as posted at www.townofpetersham.org. The board can be reached at petershamboh@verizon.net.
11. The Board of Health will also issue a permit for the sewage disposal system.
12. Items that need to be submitted to the building inspector for permit issuance are:
 - a. Plot Plan. An approved septic design is acceptable as long as it shows the location of the proposed structure on the property.
 - b. Construction Plans. Please include a cross section of the structure, showing sufficient details to fully describe the work intended.
 - c. Energy Code compliance report. MAScheck software is available online at www.mass.gov/bbbs Home Energy Rating Certificate (HERS)
 - d. Construction Supervisor's License if you are hiring a general contractor, and Home Improvement Contractor Registration for every building permit application unless you are applying as homeowner.
 - e. Worker's Compensation Insurance Affidavit must accompany every building permit application.
 - f. Debris Disposal
 - g. If applying as homeowner, include homeowner warning notice
 - Items that are only required for new homes.
 - The Building Inspector issues house numbers

01/08/2024



The Commonwealth of Massachusetts
Board of Building Regulations and Standards
Massachusetts State Building Code, 780 CMR

FOR
MUNICIPALITY
USE
Revised Mar 2011

Building Permit Application To Construct, Repair, Renovate Or Demolish a
One- or Two-Family Dwelling

This Section For Official Use Only

Building Permit Number: _____

Date Applied: _____

Signature _____

Date _____

Building Commissioner/Inspector of Buildings

I certify that the owner below is not delinquent in any Real Estate Taxes in their name in the Town of
Petersham.

Tax Collector _____

Date _____

1.1 Property Address:

1.2 Assessors Map & Parcel Numbers

1.1a Is this an accepted street? yes no

Map Number _____

Parcel Number _____

1.3 Zoning Information:

1.4 Property Dimensions:

Zoning District _____

Proposed Use _____

Lot Area (sq ft) _____

Frontage (ft) _____

1.5 Building Setbacks (ft)

Front Yard		Side Yards		Rear Yard	
Required	Provided	Required	Provided	Required	Provided

1.6 Water Supply: (M.G.L. c. 40, §54)

Public Private

1.7 Flood Zone Information:

Zone: _____ Outside Flood Zone?
Check if yes

1.8 Sewage Disposal System:

Municipal On site disposal system

SECTION 2: PROPERTY OWNERSHIP¹

2.1 Owner¹ of Record:

Name (Print) _____

City, State, ZIP _____

No. and Street _____

Telephone _____

Email Address _____

SECTION 3: DESCRIPTION OF PROPOSED WORK² (check all that apply)

New Construction <input type="checkbox"/>	Existing Building <input type="checkbox"/>	Owner-Occupied <input type="checkbox"/>	Repairs(s) <input type="checkbox"/>	Alteration(s) <input type="checkbox"/>	Addition <input type="checkbox"/>
Demolition <input type="checkbox"/>	Accessory Bldg. <input type="checkbox"/>	Number of Units _____	Other <input type="checkbox"/> Specify: _____		

Brief Description of Proposed Work²:

SECTION 4: ESTIMATED CONSTRUCTION COSTS

Item	Estimated Costs: (Labor and Materials)	Official Use Only
1. Building	\$ _____	1. Building Permit Fee: \$ _____ Indicate how fee is determined: <input type="checkbox"/> Standard City/Town Application Fee <input type="checkbox"/> Total Project Cost ³ (Item 6) x multiplier _____ x _____
2. Electrical	\$ _____	2. Other Fees: \$ _____
3. Plumbing	\$ _____	List: _____
4. Mechanical (HVAC)	\$ _____	Total All Fees: \$ _____
5. Mechanical (Fire Suppression)	\$ _____	Check No. _____ Check Amount: _____ Cash Amount: _____
6. Total Project Cost:	\$ _____	<input type="checkbox"/> Paid in Full <input type="checkbox"/> Outstanding Balance Due: _____

SECTION 5: CONSTRUCTION SERVICES

5.1 Construction Supervisor License (CSL)

Name of CSL Holder _____

No. and Street _____

City/Town, State, ZIP _____

Telephone _____

Email address _____

License Number _____

Expiration Date _____

List CSL Type (see below) _____

Type	Description
U	Unrestricted (Buildings up to 35,000 sq. ft.)
R	Restricted 1&2 Family Dwelling
M	Masonry
RC	Roofing Covering
WS	Window and Siding
SF	Solid Fuel Burning Appliances
I	Insulation
D	Demolition

5.2 Registered Home Improvement Contractor (HIC)

HIC Company Name or HIC Registrant Name _____

No. and Street _____

City/Town, State, ZIP _____

Telephone _____

HIC Registration Number _____

Expiration Date _____

Email address _____

SECTION 6: WORKERS' COMPENSATION INSURANCE AFFIDAVIT (M.G.L. c. 152, § 25C(6))

Workers Compensation Insurance affidavit must be completed and submitted with this application. Failure to provide this affidavit will result in the denial of the Issuance of the building permit.

Signed Affidavit Attached? Yes No

SECTION 7a: OWNER AUTHORIZATION TO BE COMPLETED WHEN OWNER'S AGENT OR CONTRACTOR APPLIES FOR BUILDING PERMIT

I, as Owner of the subject property, hereby authorize _____ to act on my behalf, in all matters relative to work authorized by this building permit application.

Print Owner's Name (Electronic Signature) _____

Date _____

SECTION 7b: OWNER¹ OR AUTHORIZED AGENT DECLARATION

By entering my name below, I hereby attest under the pains and penalties of perjury that all of the information contained in this application is true and accurate to the best of my knowledge and understanding.

Print Owner's or Authorized Agent's Name (Electronic Signature) _____

Date _____

NOTES:

1. An Owner who obtains a building permit to do his/her own work, or an owner who hires an unregistered contractor (not registered in the Home Improvement Contractor (HIC) Program), will not have access to the arbitration program or guaranty fund under M.G.L. c. 142A. Other important information on the HIC Program can be found at _____
Information on the Construction Supervisor License can be found at _____

2. When substantial work is planned, provide the information below:

Total floor area (sq. ft.) _____	(including garage, finished basement/attics, decks or porch)
Gross living area (sq. ft.) _____	Habitable room count _____
Number of fireplaces _____	Number of bedrooms _____
Number of bathrooms _____	Number of half/baths _____
Type of heating system _____	Number of decks/ porches _____
Type of cooling system _____	Enclosed _____ Open _____

3. "Total Project Square Footage" may be substituted for "Total Project Cost"



The Commonwealth of Massachusetts
 Department of Industrial Accidents
 1 Congress Street, Suite 100
 Boston, MA 02114-2017
 www.mass.gov/dia

Workers' Compensation Insurance Affidavit: Builders/Contractors/Electricians/Plumbers.
 TO BE FILED WITH THE PERMITTING AUTHORITY.

Applicant Information

Please Print Legibly

Name (Business/Organization/Individual): _____

Address: _____

City/State/Zip: _____ Phone #: _____

Are you an employer? Check the appropriate box:

- 1. I am an employer with _____ employees (full and/or part-time).*
- 2. I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required.]
- 3. I am a homeowner doing all work myself. [No workers' comp. insurance required.] †
- 4. I am a homeowner and will be hiring contractors to conduct all work on my property. I will ensure that all contractors either have workers' compensation insurance or are sole proprietors with no employees.
- 5. I am a general contractor and I have hired the sub-contractors listed on the attached sheet. These sub-contractors have employees and have workers' comp. insurance. ‡
- 6. We are a corporation and its officers have exercised their right of exemption per MGL c. 152, §1(4), and we have no employees. [No workers' comp. insurance required.]

Type of project (required):

- 7. New construction
- 8. Remodeling
- 9. Demolition
- 10. Building addition
- 11. Electrical repairs or additions
- 12. Plumbing repairs or additions
- 13. Roof repairs
- 14. Other _____

*Any applicant that checks box #1 must also fill out the section below showing their workers' compensation policy information.

† Homeowners who submit this affidavit indicating they are doing all work and then hire outside contractors must submit a new affidavit indicating such.

‡ Contractors that check this box must attach an additional sheet showing the names of the sub-contractors and state whether or not those entities have employees. If the sub-contractors have employees, they must provide their workers' comp. policy number.

I am an employer that is providing workers' compensation insurance for my employees. Below is the policy and job site information.

Insurance Company Name: _____

Policy # or Self-ins. Lic. #: _____ Expiration Date: _____

Job Site Address: _____ City/State/Zip: _____

Attach a copy of the workers' compensation policy declaration page (showing the policy number and expiration date).

Failure to secure coverage as required under MGL c. 152, §25A is a criminal violation punishable by a fine up to \$1,500.00 and/or one-year imprisonment, as well as civil penalties in the form of a STOP WORK ORDER and a fine of up to \$250.00 a day against the violator. A copy of this statement may be forwarded to the Office of Investigations of the DIA for insurance coverage verification.

I do hereby certify under the pains and penalties of perjury that the information provided above is true and correct.

Signature: _____ Date: _____

Phone #: _____

Official use only. Do not write in this area, to be completed by city or town official.

City or Town: _____ Permit/License # _____

Issuing Authority (circle one):

- 1. Board of Health
- 2. Building Department
- 3. City/Town Clerk
- 4. Electrical Inspector
- 5. Plumbing Inspector
- 6. Other _____

HOMEOWNER WARNING NOTICE

IF YOU ARE APPLYING FOR A BUILDING PERMIT AS A HOMEOWNER

- A homeowner is defined as a person who owns a parcel of land on which they reside, or is intending to reside, in a one or two family dwelling, with attached or detached structures accessory to such use and/or farm structures. If you do not meet this definition, a building permit cannot be issued to you as a homeowner.
- You will be personally responsible for all work on this project.
- You are responsible to see that all work meets the Massachusetts State Building Code and the Town Zoning By-Laws.
- You must supervise all work.
- You must contact the Bldg. Dept. to schedule all required inspections.
- You must be present for all inspections.
- You have waived all rights to the Massachusetts Guaranty Fund.
- You are the General Contractor of the project and a court of law will view you as such if you are sued, or if you should have the need to sue another party.
- Your subcontractors may lien your property.
- Any worker injured on your property may sue you, if you, or the company they work for, does not carry Workman's Compensation Insurance.
- Failure to carry Workman's Comp. Ins. may result in criminal penalties, i.e. fines and/or imprisonment (Reference MGL c. 152 Sec. 25).
- It is not the responsibility of the Building Department to quote, give explanations or advice on or about Massachusetts Building Code. It is your responsibility to understand and follow all codes.

This warning has been assembled due to a majority of those citizens that sign a Homeowner's Exemption Form are not aware of ALL the responsibilities, when assuming the General Contractor Responsibilities.

Your signature below verifies you have read this warning and fully understand its meanings and the ramifications of being General Contractor.

Signature _____ Date _____

Property _____ Permit # _____



**COMMONWEALTH OF MASSACHUSETTS
DEBRIS DISPOSAL AFFIDAVIT**

Town of Petersham, Massachusetts

IN ACCORDANCE WITH THE PROVISIONS OF MGL Chapter 40, Section 54,

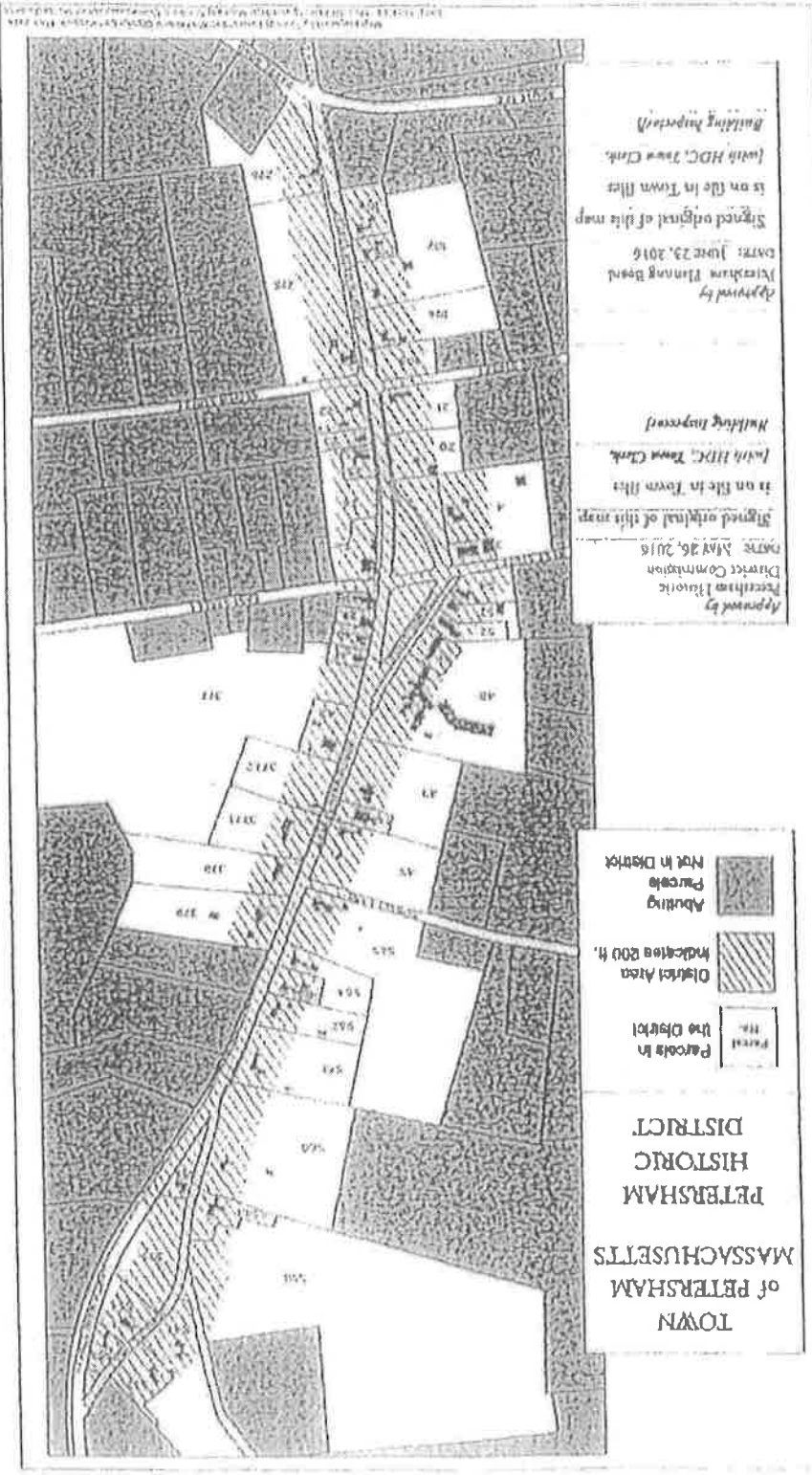
A CONDITION OF BUILDING PERMIT NUMBER _____
IS THAT THE DEBRIS RESULTING FROM THIS WORK SHALL BE DISPOSED OF
IN A PROPERLY LICENSED SOLID WASTE DISPOSAL FACILITY AS DEFINED
BY MGL Chapter 111, Section 150A.

DISPOSAL/DUMPSTER FIRM

CONSTRUCTION SITE ADDRESS

SIGNATURE OF PERMIT APPLICANT

DATE



TOWN
of PETERSHAM
PETERSHAM
HISTORIC
DISTRICT

-  Parcels in the District
-  District Area
-  Adjoining Parcels
-  Not in District

Approved by
Peterborough Historic
District Commission
DATE: May 26, 2016
Signed original of this map
is on file in Town files
with HDC, Town Clerk.

Approved by
Peterborough Planning Board
DATE: June 23, 2016
Signed original of this map
is on file in Town files
with HDC, Town Clerk.
(Building Inspector)

General Information

Applicability: Building permits are required for any construction, reconstruction, alteration, repair, moving or demolition of a building or structure; or change of use and occupancy; or for the installation or alteration of any equipment which is regulated under the provisions of the Massachusetts State Building Code.

Exemptions: Building permits are not required for, one story detached accessory structures used as tool or storage sheds provided that the floor area does not exceed 200 square feet in Residential Zoning or 120 square feet in Commercial or Business zoning. (regardless of the size, zoning setbacks must be followed) ; fences 7 feet in height or less; retaining walls which retain less than 4 feet of unbalanced fill; ordinary repairs and maintenance which do not alter the building or structure; greenhouse covered exclusively with plastic film.

Submittals

Application: Application must be made by the owner or authorized agent. The application must be thoroughly and accurately completed. Accuracy and completeness will directly affect the time required to process the application through the Planning, Conservation, Health, Water and Sewer, Fire and Inspections Departments. The Massachusetts State Building Code (780 CMR) provide that the building official shall review an application within 30 days of filing. For purpose of this section, the application is not considered to have been filed until other departments have approved it and it is returned to the Inspections Department for plan review. The building permit fee, payable to the town of permit application in the correct amount , must be included with the permit application (some amounts may be determined after permit application is presented). Permit fees are not reimbursable, non-transferable, nor does payment guarantee issuance of a building permit.

Construction Documents: Include one (1) set of scaled drawings and specifications and two (2) half size or 11 x 17 set with the completed application. The plans must be of sufficient clarity, detail and dimensions to show compliance

with the building code, including identification of Code Books the plans are drawn on. At a minimum, construction documents shall include the following: foundation plans and details, floor plans with room dimensions and showing the location of all fire protection systems and heating system storage areas, exterior building elevations, framing plans showing structural elements and connection details, schedule and/or detail of door and window installation and energy conservation details. If the proposed work involves adding a bedroom, the plans must show location of smoke and carbon monoxide detectors.

Work requiring the installation of fire alarm/fire protection must also be shown on the plans. Upon plan review by the Inspections Department, one (1) set of plans will be forwarded to the Fire Department for inspection purposes. Upon building permit issuance, the full size set of plans will be returned to the applicant with the required inspections noted on the plans.

Stamped Plans: Plans and specifications for any building containing more than 35,000 cubic feet of enclosed space must be stamped and signed by a Massachusetts registered architect or engineer. In addition, the building official may require the services of a registered design professional for plans involving the design of any structural member or building system.

Plot Plan: If the footprint of an existing building or structure is being changed or a new building is being located on a lot, a scaled plot plan must be submitted with the application. The plot plan, drawn and stamped by a registered land surveyor, must show lot dimensions, locations and setbacks of all existing and proposed structures, easements, septic systems, location of any flood zones and wetland. A mortgage survey plan will not be accepted to satisfy this requirement.

Construction Supervisor License and/or Home Improvement registration:

If application is made by the contractor of record, include a valid copy of your Massachusetts Construction Supervisor License and/or Home Improvement Registration, if applicable. If a homeowner is applying for a building permit (one and

two family only), a completed homeowner exemption affidavit must be included with the application (form available at the Inspections Dept. or on-line).

Debris Disposal Affidavit: A signed completed Debris Disposal Affidavit is to included with all permit applications (form available at Inspections Dept. or on-line).

Worker's Compensation Insurance Affidavit:

Complete and sign Worker's Compensation Insurance affidavit and include copy of insurance policy, if applicable (form available at Inspections Dept. or on-line).

Additional Information

Posting of Permit: The building permit signature card must be posted at the work site in clear view and protected by the weather at all times and made available to the appropriate inspector during the required inspection. Provide a self addressed stamped envelope for permit signature card to be forwarded.

Required Inspections: The building permit will indicate specific points in the construction process at which inspections must be made. No work should proceed until each of these phases has been inspected and approved. It is the applicant's responsibility to notify each inspector at least 48 business hours in advance of each required inspection.

Expiration of Permit: A building permit expires if the work authorized is not started within six (6) months of issuance and continued, in good faith, to completion.

Occupancy: Upon completion of work for new construction or change of use, a Certificate of Use and Occupancy must be obtained by the applicant before the building can be occupied.