

**The Commonwealth of
Massachusetts**
Department of Public Safety
Massachusetts State Building Code (780 CMR)
**Building Permit Application for any Building
Demolition**

The City of Holyoke
Building Department
20 Korean Veterans Plaza
Room 300
Holyoke, MA 01040
413-322-5600
www.holyoke.org



(This Section For Official Use Only)

Building Permit Number: _____ Date Applied: _____ Building Official: _____

SECTION 1: LOCATION (Please indicate Block # and Lot # for locations for which a street address is not available)

No. and Street City /Town Zip Code Name of Building (if applicable)

SECTION 2: PROPOSED WORK

Edition of MA State Code used _____ If New Construction check here or check all that apply in the two rows below

Existing Building Repair Alteration Addition Demolition (Please fill out and submit Appendix 1)

Change of Use Change of Occupancy Other Specify: _____

Are building plans and/or construction documents being supplied as part of this permit application? Yes No

Is an Independent Structural Engineering Peer Review required? Yes No

Brief Description of Proposed Work: _____

SECTION 3: COMPLETE THIS SECTION IF EXISTING BUILDING UNDERGOING RENOVATION, ADDITION, OR CHANGE IN USE OR OCCUPANCY

Check here if an Existing Building Investigation and Evaluation is enclosed (See 780 CMR 34)

Existing Use Group(s): _____ Proposed Use Group(s): _____

SECTION 4: BUILDING HEIGHT AND AREA

	Existing	Proposed
No. of Floors/Stories (include basement levels) & Area Per Floor (sq. ft.)		
Total Area (sq. ft.) and Total Height (ft.)		

SECTION 5: USE GROUP (Check as applicable)

A: Assembly A-1 A-2 Nightclub A-3 A-4 A-5 **B: Business** **E: Educational**

F: Factory F-1 F2 **H: High Hazard** H-1 H-2 H-3 H-4 H-5

I: Institutional I-1 I-2 I-3 I-4 **M: Mercantile** **R: Residential** R-1 R-2 R-3 R-4

S: Storage S-1 S-2 **U: Utility** **Special Use** and please describe below:

Special Use: _____

SECTION 6: CONSTRUCTION TYPE (Check as applicable)

IA **IB** **IIA** **IIB** **IIIA** **IIIB** **IV** **VA** **VB**

SECTION 7: SITE INFORMATION (refer to 780 CMR 111.0 for details on each item)

Water Supply: Public <input type="checkbox"/> Private <input type="checkbox"/>	Flood Zone Information: Check if outside Flood Zone <input type="checkbox"/> or indentify Zone: _____	Sewage Disposal: Indicate municipal <input type="checkbox"/> or on site system <input type="checkbox"/>	Trench Permit: A trench will not be required <input type="checkbox"/> or trench permit is enclosed <input type="checkbox"/>	Debris Removal: Licensed Disposal Site <input type="checkbox"/> or specify: _____
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Railroad right-of-way:
Not Applicable
or Consent to Build enclosed

Hazards to Air Navigation:
Is Structure within airport approach area?
Yes or No

[MA Historic Commission Review Process:](#)
Is their review completed?
Yes No

SECTION 8: CONTENT OF CERTIFICATE OF OCCUPANCY

Edition of Code: _____ Use Group(s): _____ Type of Construction: _____ Occupant Load per Floor: _____

Does the building contain an Sprinkler System?: _____ Special Stipulations: _____

SECTION 9: PROPERTY OWNER AUTHORIZATION

Name and Address of Property Owner

Name (Print) _____ No. and Street _____ City/Town _____ Zip _____

Property Owner Contact Information:

Title _____ Telephone No. (business) _____ Telephone No. (cell) _____ e-mail address _____

If applicable, the property owner hereby authorizes

_____ Name _____ Street Address _____ City/Town _____ State _____ Zip _____

to act on the property owner's behalf, in all matters relative to work authorized by this building permit application.

SECTION 10: CONSTRUCTION CONTROL (Please fill out Appendix 2)

(If building is less than 35,000 cu. ft. of enclosed space and/or not under Construction Control then **check here** and skip Section 10.1)

10.1 Registered Professional Responsible for Construction Control

_____ Name (Registrant) _____	_____ Telephone No. _____	_____ e-mail address _____	_____ Registration Number _____
_____ Street Address _____	_____ City/Town _____	_____ State _____ Zip _____	_____ Discipline _____ Expiration Date _____

10.2 General Contractor

_____ Company Name _____

_____ Name of Person Responsible for Construction _____ License No. and Type if Applicable _____

_____ Street Address _____ City/Town _____ State _____ Zip _____

_____ Telephone No. (business) _____ Telephone No. (cell) _____ e-mail address _____

SECTION 11: [WORKERS' COMPENSATION INSURANCE AFFIDAVIT](#) (M.G.L. c. 152, § 25C(6))

A Workers' Compensation Insurance Affidavit from the MA Department of Industrial Accidents 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.

Is a signed Affidavit submitted with this application? **Yes** **No**

SECTION 12: CONSTRUCTION COSTS AND PERMIT FEE

Item	Estimated Costs: (Labor and Materials)	Total Construction Cost (from Item 6) = \$ _____ Building Permit Fee = Total Construction Cost x _____ (Insert here appropriate municipal factor) = \$ _____. Note: Minimum fee = \$ _____ (contact municipality) Enclose check payable to _____ (contact municipality) and write check number here _____
1. Building	\$ _____	
2. Electrical	\$ _____	
3. Plumbing	\$ _____	
4. Mechanical (HVAC)	\$ _____	
5. Mechanical (Other)	\$ _____	
6. Total Cost	\$ _____	

SECTION 13: SIGNATURE OF BUILDING PERMIT APPLICANT

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.

_____ Please print and sign name _____ Title _____ Telephone No. _____ Date _____

_____ Street Address _____ City/Town _____ State _____ Zip _____

Municipal Inspector to fill out this section upon application approval: _____ Name _____ Date _____

Appendix 2

Construction Documents are required for structures that must comply with 780 CMR 107. The checklist below is a compilation of the documents that may be required for this. The applicant shall fill out the checklist and provide the contact information of the registered professionals responsible for the documents. This appendix is to be submitted with the building permit application.

Checklist for Construction Documents*

No.	Item	Mark "x" where applicable		
		Submitted	Incomplete	Not Required
1	Architectural			
2	Foundation			
3	Structural			
4	Fire Suppression			
5	Fire Alarm (may require repeaters)			
6	HVAC			
7	Electrical			
8	Plumbing (include local connections)			
9	Gas (Natural, Propane, Medical or other)			
10	Surveyed Site Plan (Utilities, Wetland, etc.)			
11	Specifications			
12	Structural Peer Review			
13	Structural Tests & Inspections Program			
14	Fire Protection Narrative Report			
15	Existing Building Survey/Investigation			
16	Energy Conservation Report			
17	Architectural Access Review (521 CMR)			
18	Workers Compensation Insurance			
19	Hazardous Material Mitigation Documentation			
20	Other (Specify)			
21	Other (Specify)			
22	Other (Specify)			

*Areas of Design or Construction for which plans are not complete at the time of application submittal must be identified herein. Work so identified must not be commenced until this application has been amended and the proposed construction document amendment has been approved by the authority having jurisdiction. Work started prior to approval may be subjected to *triple the original permit fee*.

Registered Professional Contact Information

Name (Registrant)	Telephone No.	e-mail address	Registration Number
Street Address	City/Town	State	Zip
Discipline	Expiration Date		
Name (Registrant)	Telephone No.	e-mail address	Registration Number
Street Address	City/Town	State	Zip
Discipline	Expiration Date		
Name (Registrant)	Telephone No.	e-mail address	Registration Number
Street Address	City/Town	State	Zip
Discipline	Expiration Date		



The Commonwealth of Massachusetts
City of Holyoke
Department of Codes and Inspections
20 Korean Veterans Plaza, Holyoke, Massachusetts 01040 (413) 322-5600

Demolition Affidavit

Project Name:

Project Address: _____ **Map:** _____ **Block:** _____ **Lot:** _____

In accordance with Section 54 of Chapter 40 of the Massachusetts General laws, I acknowledge that as a condition of a demolition permit being issued to me, all debris from the demolition shall be disposed of in a properly licensed solid waste disposal facility as defined in Section 150A of Chapter 111 of the General Laws.

Disposal Facility _____

Address _____ City _____ State _____ ZIP _____

I shall notify the Building Official , within the statutory time limit, of the location of disposal for the demolition debris by submitting proper receipts or manifests.

Signature of Permit Applicant _____ Date _____

Printed Name _____ Telephone _____

Company _____

Address _____ City _____ State _____ ZIP _____

Tax Collector Affidavit

This is to certify that, in accordance with Chapter 74 of the Acts of 1996, the persons and properties named herein have NO uncollected taxes, fines, fees or other charges owing the City of Holyoke that would prevent the issuance of permits.

Holyoke Tax Collector of his designee

Date

Collector's stamp or seal

Sec. 18-33 Demolition of buildings.

All buildings demolished in the City must meet the following requirements:

- (1) *Completion time.* In all cases where demolition of a building is undertaken, such demolition shall be completed as expeditiously as practicable, but in no case longer than as allowed in the following schedule. Time limits for completion shall run from the date on which the demolition permit is issued.

<i>Total Building Square Footage</i>	<i>Completion Time</i>
0 - 5,000	6 weeks
5,001 – 9,000	8 weeks
9,001 – 13,000	10 weeks
13,001 -	An additional week for every additional 6,000 square feet

- (2) *Bond requirement.* Any person or corporation applying for a permit to demolish a building shall submit a bond, or cash, or certified check, or a treasurer’s or cashier’s check issued by a reputable bank or trust company made payable to the City. The bond shall be in a form satisfactory to the City, with a surety company qualified to do business in the Commonwealth of Massachusetts satisfactory to the City and shall be conditioned upon the faithful completion of such demolition work in accordance with all applicable laws and codes, and within the time period set forth in subsection (1) of this section. After completion of demolition, four inches of loam shall be spread, and grass seed planted.

- (3) *Bond schedule.* The amount of such bond, cash or check shall be determined according to the following schedule:

<i>Total Building Square Footage</i>	<i>Amount of Bond</i>
750-5,000	\$3,000.00
5,001-9,000	7,000.00
9,001-13,000	10,000.00
13,001-	An additional \$3,000.00 for each 6,000 square feet or fraction thereof.

CITY OF HOLYOKE

In the Year Two Thousand

THIRD AMENDMENT TO CHAPTER 18 OF THE REVISED CODE OF ORDINANCES OF THE CITY OF HOLYOKE, MASSACHUSETTS, 1997

AN ORDINANCE

SECTION 1. Chapter 18 entitled, "Building and Building Regulations" of the Revised Code of Ordinances of the City of Holyoke, Massachusetts, 1997, as amended, is hereby further amended by adding thereto the following:

Sec. 18-34 Demolition Delay Ordinance.

A. Purpose.

This ordinance is adopted for the purpose of protecting the historic and aesthetic qualities of the City by preserving, rehabilitating, or restoring, whenever possible, buildings or structures which contribute or reflect distinctive features of the architectural or historic resources of the City, thereby promoting the public welfare and preserving the cultural heritage of the City. A demolition delay ordinance will provide time to explore demolition alternatives, such as developing adaptive re-uses for the building or structure, locating purchasers, or moving the building or structure to a new location.

B. Definitions. As used in this chapter, the following terms shall mean:

Commissioner: The Holyoke Building Commissioner

Commission: The Holyoke Historical Commission

Historically Significant Building or Structure: Any building or structure which is (1) listed on the national Register of Historical Places; (2) listed on the current Historic Inventory of Holyoke; (3) located within two hundred (200) feet of the boundary line on any National Register or local historic district; or (4) greater than fifty years old at the time of the demolition permit application filing.

Demolition Permit. The permit issued by the Commissioner as required by the state building code for the demolition, partial demolition, or removal of a building or structure.

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- C. Procedure.
1. Preamble. No permit for the demolition of a Historically Significant Building or Structure shall be granted unless it is first submitted to the Commission for review and comment in accordance with the provisions of this ordinance. The City of Holyoke shall be required to comply with this ordinance when the City or its agents are applicants for a demolition permit. The Commissioner shall be required to notify the Commission of all notices sent to property owners pursuant to 780 CMR §§ 121.4 and 121.5 and M.G.L. c. 143 §§ 8 and 9.
 2. Initial Determination.
 - a. The Commissioner shall be responsible for making an initial determination of the applicability of this ordinance and notifying the Commission within seven (7) days of said determination that a property owner of the City of Holyoke has applied for a demolition permit. The Commissioner shall be required to notify the Commission of all notices sent to property owners pursuant to 780 CMR §§ 121.4 and 121.5 and M.G.L. c. 143 §§ 8 and 9. The Commissioner shall forward a copy of each demolition permit application for a building or structure identified in this section to the chair of the Commission within seven (7) days after filing.
 - b. If the building or structure is deemed historically significant, the Commissioner and the applicant shall be notified by the Commission that no demolition permit shall be issued until a thorough investigation is undertaken and a final written recommendation is provided by the Commission within a four (4) month review period.
 3. Review period.
 - a. Within the four (4) month review period, the Commission shall meet with the property owner and conduct special investigations or hearings as it may determine in the formulation of its written recommendation. The following shall be considered in the Commission's deliberations:
 - (1) The building or structure is of such interest or quality that it would meet National Historical Register criteria for designation as a historical or architectural landmark;

- (2) The building or structure is of such unusual or uncommon design, texture, or material that it could not be reproduced without great difficulty or expense;
 - (3) The building or structure is of such architectural or historic interest that its removal would be a detriment to the public interest.
- b. Within the four (4) month review period and within sixty (60) days of the notification to the Commission of the determination of historical significance, the Commission may request that the applicant supply the Commission with a demolition plan review. The review shall include:
 - (1) a map to be supplied by the Holyoke Planning Department indicating the location of the building or structure with reference to lot lines and abutting buildings and structures;
 - (2) photographs of all street façade elevations;
 - (3) a written description of the building or structure, or part thereof, to be demolished;
 - (4) the reason(s) for the proposed demolition and data supporting said reason, including data sufficient to establish any economic justification for demolition; and
 - (5) a description of the proposed reuse of the parcel on which the building or structure is located,
- c. Within the four (4) month review period, the Commission shall hold a public hearing, and publish notice of the time, place and purpose thereof in a newspaper of general circulation at least fourteen (14) days prior to said hearing to any person whose property abuts the building or structure and abutters within three hundred (300) feet of the property line of the building or structure as determined from the records of the city assessors. A copy of said notice shall also be sent to the Planning Board, City Council, mayor, Clearance review Committee and Holyoke Survey Board. All costs related to the public hearing shall be borne by the applicant.
- d. Buildings or structures that are deemed historically significant by the Commissioner and identified by the Clearance Review Committee as potential candidates for demolition, shall be subject

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to a simultaneous review process by both the Clearance Review Committee and the Commission. Said process shall not exceed the four-month review period of this ordinance and shall include a joint public hearing of the Clearance review Committee and Commission.

4. Final Determination.

Within the four (4) month period, the Commission shall issue a written recommendation to the applicant and the Commissioner, regarding the granting of the demolition permit. If no such recommendation is issued within said period, the Commission shall be deemed to have recommended the granting of said demolition permit. No permit for the erection of a new building or structure on the site of an existing historically significant building or structure shall be issued prior to the issuance of a demolition permit for the existing building or structure.

- D. The provisions of this ordinance shall not apply whenever, in the opinion of the Commissioner, the condition of any Historically Significant Building or Structure requires immediate emergency action to abate a threat to the health or safety of the public.
- E. The provisions of this ordinance shall not apply to buildings or structures that have undergone complete review by the Clearance Review Committee in accordance with the City of Holyoke Fair Housing Plan and have been deemed suitable for demolition. However, buildings or structures that have been deemed suitable for demolition by the Clearance Review Committee and not demolished within 24 months of the Clearance Review Committee public hearing shall be subject to further review in accordance with the provisions of this ordinance.

SECTION 2. All ordinances or parts of ordinances inconsistent herewith are hereby repealed.

SECTION 3. This ordinance shall take effect on the date of its passage.



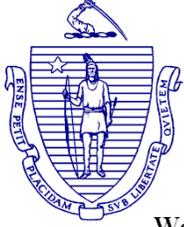
City of Holyoke, Department of Codes and Inspections
20 Korean Veterans Plaza, Room 300
Holyoke, MA 01040 Telephone (413) 322-5600 Fax (413) 322-5601

Our Mission: "To improve the quality of life for the people of Holyoke by advancing public health and safety through effective building code enforcement."

Check List for Controlled Construction Building Permits

780 CMR, 8th Edition

1. Completed Construction Control Affidavit (107.6)
2. Completed Building Permit Application with signature of owner or owner's agent 105.1
3. Two (2) sets of plans (107.1) with original stamp and signature of a Massachusetts registered professional engineer or architect on each page 107.1.1
4. The cover page of all plans shall indicate the *Edition of the code under which the permit is to be issued, Use Group, Construction Type, Fire Grading, Maximum Live Load, and Occupancy Load* of the structure.
5. Two (2) sets of sprinkler plans and calculations signed and stamped in original by a Massachusetts registered professional engineer qualified to design sprinkler systems 107.1.1 and 107.2.2
6. Fire protection construction documents listed in 901.21
7. Payment of sewer entrance fees for new construction or new sewer service for renovations requiring such connections.
8. Payment of building fees in accordance with the Holyoke Code of Ordinances Section 18-71 to 18-91.
9. City Tax Collector Affidavit pursuant to Chapter 74 of the Acts of 1996



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 attached an additional sheet showing the name 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 _____

Contact Person: _____ Phone #: _____

Information and Instructions

Massachusetts General Laws chapter 152 requires all employers to provide workers' compensation for their employees. Pursuant to this statute, an *employee* is defined as "...every person in the service of another under any contract of hire, express or implied, oral or written."

An *employer* is defined as "an individual, partnership, association, corporation or other legal entity, or any two or more of the foregoing engaged in a joint enterprise, and including the legal representatives of a deceased employer, or the receiver or trustee of an individual, partnership, association or other legal entity, employing employees. However the owner of a dwelling house having not more than three apartments and who resides therein, or the occupant of the dwelling house of another who employs persons to do maintenance, construction or repair work on such dwelling house or on the grounds or building appurtenant thereto shall not because of such employment be deemed to be an employer."

MGL chapter 152, §25C(6) also states that "**every state or local licensing agency shall withhold the issuance or renewal of a license or permit to operate a business or to construct buildings in the commonwealth for any applicant who has not produced acceptable evidence of compliance with the insurance coverage required.**"

Additionally, MGL chapter 152, §25C(7) states "Neither the commonwealth nor any of its political subdivisions shall enter into any contract for the performance of public work until acceptable evidence of compliance with the insurance requirements of this chapter have been presented to the contracting authority."

Applicants

Please fill out the workers' compensation affidavit completely, by checking the boxes that apply to your situation and, if necessary, supply sub-contractor(s) name(s), address(es) and phone number(s) along with their certificate(s) of insurance. Limited Liability Companies (LLC) or Limited Liability Partnerships (LLP) with no employees other than the members or partners, are not required to carry workers' compensation insurance. If an LLC or LLP does have employees, a policy is required. Be advised that this affidavit may be submitted to the Department of Industrial Accidents for confirmation of insurance coverage. **Also be sure to sign and date the affidavit.** The affidavit should be returned to the city or town that the application for the permit or license is being requested, **not** the Department of Industrial Accidents. Should you have any questions regarding the law or if you are required to obtain a workers' compensation policy, please call the Department at the number listed below. Self-insured companies should enter their self-insurance license number on the appropriate line.

City or Town Officials

Please be sure that the affidavit is complete and printed legibly. The Department has provided a space at the bottom of the affidavit for you to fill out in the event the Office of Investigations has to contact you regarding the applicant. Please be sure to fill in the permit/license number which will be used as a reference number. In addition, an applicant that must submit multiple permit/license applications in any given year, need only submit one affidavit indicating current policy information (if necessary) and under "Job Site Address" the applicant should write "all locations in _____(city or town)." A copy of the affidavit that has been officially stamped or marked by the city or town may be provided to the applicant as proof that a valid affidavit is on file for future permits or licenses. A new affidavit must be filled out each year. Where a home owner or citizen is obtaining a license or permit not related to any business or commercial venture (i.e. a dog license or permit to burn leaves etc.) said person is NOT required to complete this affidavit.

The Department's address, telephone and fax number:

The Commonwealth of Massachusetts
Department of Industrial Accidents
1 Congress Street, Suite 100
Boston, MA 02114-2017

Tel. # 617-727-4900 ext. 7406 or 1-877-MASSAFE

Fax # 617-727-7749

www.mass.gov/dia