

APPLICATIONS MUST BE FILLED OUT IN INK

Each Building on a separate application blank.
Bond MUST be submitted with this application
Write legibly. OWNERSHIP and detail must be complete.

No. _____

APPLICATION FOR PERMIT TO DEMOLISH
MIDDLETON, MA

Date: _____

Location (Street & No.) _____

Name & Address of Owner _____

Name & Address of Wrecker _____

Present use of building _____

If dwelling, # of families _____

Material of building _____

Size of building: front _____ rear _____ side _____

Number of stories _____

Starting date of demolition _____ Completion date _____

Bond to the Town of Middleton _____

Amount of bond _____ Total estimate cost _____

NOTICE

DISCONTINUING OF UTILITIES AND CAPPING OF SEWER AND DRAIN CONNECTIONS:

Prior to the removal a building, all interested public utility companies and the Town of Middleton Water Department shall be notified of such removal or demolition by the owner of the building so that their respective services to the building may be properly and permanently discontinued, or otherwise protected or secured.

Sewer and drain connections from buildings or structures which have been demolished or removed from the site shall be permanently capped by the owner, applicant or person in charge of the work, and such person shall promptly notify the Town of Middleton Sewer Department. No backfill shall be placed over such connections until the Superintendent of Sewers shall have approved the work.

Please have applicable departments sign below when disconnections are completed.

Middleton Electric Light Department

Middleton Water Department

Fire Department (oil tanks)

Plumbing/Gas

Signature Of Owner or Authorized Agent: _____

TOWN OF MIDDLETON
DEBRIS DISPOSAL AFFIDAVIT

In accordance with the provisions of MGL C40, S54, a condition of your Building Permit is that the debris resulting from this work shall be disposed of in a properly licensed solid waste facility as defined by MGL C111, S150A.

The name & address of disposal firm debris will be disposed of at:

Name of Facility

Address

*****All Debris to be disposed of at a licensed facility*****

Signature of Applicant _____

Address of Applicant _____

Date _____



The Commonwealth of Massachusetts
 Department of Industrial Accidents
 Office of Investigations
 600 Washington Street
 Boston, MA 02111
 www.mass.gov/dia

Workers' Compensation Insurance Affidavit: Builders/Contractors/Electricians/Plumbers
Applicant Information **Please Print Legibly**

Name (Business/Organization/Individual): _____

Address: _____

City/State/Zip: _____ Phone #: _____

Are you an employer? Check the appropriate box:

- | | |
|--|--|
| <p>1. <input type="checkbox"/> I am an employer with _____ employees (full and/or part-time).*</p> <p>2. <input type="checkbox"/> I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required.]</p> <p>3. <input type="checkbox"/> I am a homeowner doing all work myself. [No workers' comp. insurance required.] †</p> | <p>4. <input type="checkbox"/> I am a general contractor and I have hired the sub-contractors listed on the attached sheet. ‡ These sub-contractors have workers' comp. insurance.</p> <p>5. <input type="checkbox"/> 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.]</p> |
|--|--|

Type of project (required):

6. New construction
7. Remodeling
8. Demolition
9. Building addition
10. Electrical repairs or additions
11. Plumbing repairs or additions
12. Roof repairs
13. 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 their workers' comp. policy information.

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 Section 25A of MGL c. 152 can lead to the imposition of criminal penalties of 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. Be advised that 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 #: _____



CONTRACTS
ALL CONTRACTS OVER \$1,000 (ONE THOUSAND DOLLARS)
MUST BE IN WRITING

The law requires the following FOURTEEN items to be included in any contract between the homeowner and registered home improvement contractor in all contracts for home improvement work subject to MGL c 142A

1. The complete agreement between the contractor and the owner and a clear description of any other documents which are part of the agreement.
2. The full names, federal I.D. number (if applicable), addresses (Not P.O. Box numbers) of the parties, the contractor's registration number, the name(s) of the salesperson(s) involved (if any) and the date the contract was executed by the parties.
3. The date on which the work is scheduled to begin and the date the work is scheduled to be substantially completed.
4. A detailed description of the work to be done and the materials to be used.
5. The total amount agreed to be paid for the work to be performed under the contract.
6. A time schedule of payments to be made under the contract and the amount of each payment stated in dollars, including all finance charges, if any. Any deposit required to be paid in advance of the start of the work SHALL NOT EXCEED one-third of the total contract price or the actual cost of any material or equipment of a special order or custom made nature, which must be ordered in advance of the start of the work to assure that the project will proceed on schedule. No final payment shall be demanded until the contract is completed to the satisfaction of all parties.
7. All parties must sign the contract.
8. There shall be a clear and conspicuous notice stating;
 - a. That all home improvement contractors and subcontractors shall be registered and that any inquiries about a contractor or subcontractor relating to registration should be directed to;

Registration Division, Program Coordinator
One Ashburton Place, Room 1301
Boston, MA 02108
(617) 727-3200 ext. 25239

- b. The contractor's registration number must be on the first page of the contract.
- c. The homeowner's three-day cancellation rights under MGL c 93 s 48; MGL c 140D s 10 or MGL c 255D s 14 as may be applicable.
- d. All warranties on the owner's rights under the provision of 780 CMR R6 and MGL c 142A

- e. In ten point bold type or larger, directly above the space provided for the signature, the following statement;

“DO NOT SIGN THIS CONTRACT IF THERE ARE ANY BLANK SPACES”

- f. Whether any lien or security interest is on the residence as a consequence of the contract.
9. An enumeration of such other matters upon which the owner and contractor may lawfully agree.
10. Any other provisions otherwise required by the applicable laws of the Commonwealth.
11. Permit Notice; Every contract shall contain a clause informing the owner of the following;
- a. any and all necessary construction-related permits;
 - b. that it shall be the obligation of the contractor to obtain such permits as the owner's agent.
 - c. that owner's who secure their own construction-related permits or deal with unregistered contractors shall be excluded from access to the Guarantee Fund.
12. Acceleration of payment; No contract shall contain an acceleration clause under which any part, or all of the balance not yet due may be declared due and payable because the holder deems himself to be insecure. However, where the contractor deems himself to be insecure he may require, as a prerequisite to continuing said work, that the balance of funds due under the contract, which are in possession of the owner, shall be placed in a joint escrow account requiring the signatures of the home improvement contractor and the owner for withdrawal.
13. No work shall begin prior to the signing of the contract and transmittal to the owner a copy of such contract.
14. Arbitration: If the contractor determines that in the event of a dispute, the contractor wishes the dispute to be settled by arbitration, this fact must be signified on the contract and both the contractor and owner shall sign this clause separately. The following format is acceptable (in 10 point type or larger);

****The contractor and the homeowner hereby mutually agree in advance that in the event that the contractor has a dispute concerning this contract, the contractor may submit such dispute to a private arbitration service which has been approved by the Office of Consumer Affairs and Business Regulation and the consumer shall be required to submit to such arbitration as provided in MGL c 142A.***

Owner: _____

Contractor: _____

NOTICE: The signatures of the parties above apply only to the agreement of the parties to alternate dispute resolution initiated by the contractor. The owner may initiate alternative dispute resolution even where this section is not signed by the parties.



TOWN OF MIDDLETON

Office of the INSPECTOR OF BUILDINGS

195 North Main Street
Middleton, MA 01949

Tel (978) 777-2850
Fax (978) 774-0718

DATE: _____
TO: Inspectional Services
FROM: Town Treasurer, M.E.L.D.
RE: Confirmation that all taxes and electric utilities are current

As requested, please be advised of the tax status of the property listed below:

Property Owner: _____

Property Address: _____

OFFICE USE ONLY

_____ Taxes are current on the property.

_____ Excise Tax on this customer is current.

_____ Electric is current on this property.

Other:
