

TOWN OF SPENCER

Office of Development & Inspectional Services

Planning Board
Zoning Board of Appeals
Conservation Commission
Board of Health

Town Planner
Inspector of Buildings
Health Agent
Wetland/Soil Specialist



Memorial Town Hall
157 Main Street
Spencer, MA 01562

Tel: 508-885-7500 ext. 180
Fax: 508-885-7519

Article 2. Town Administration
Section 8. Local Licenses and Permits – Failure to Pay Municipal Taxes or Charges (Amended 05/04/2006 Art. 13)

EXEMPTIONS

1. Open burning
2. Bicycle permits
3. Sales of articles for charitable purposes
4. Children work permits
5. Clubs, associations dispensing food or beverage licenses
6. Dog licenses
7. Fishing, hunting or trapping licenses
8. Marriage licenses
9. Theatrical events, public exhibition permits
10. Endorsement of ANR plans
11. Preliminary or Definitive Subdivision Plan applications
12. Variance requests
13. Orders of condition for any application before the Conservation Commission

The following information is needed in order to approve the application being submitted:

- **Town of Spencer General By-Laws Article 2. Town Administration, Section 8. Local Licenses and Permits – Failure to Pay Municipal Taxes or Charges** (Amended 05/04/2006 Art. 13) Any board, officer, or department of the Town of Spencer is hereby authorized to deny any application for, or revoke or suspend a building permit, or any local license or permit including renewals and transfers, for any person, corporation or business enterprise, who has neglected or refused to pay any local taxes, fees, assessments, betterments or any other municipal charges, including amounts assessed under the provisions of Massachusetts General Laws chapter 40, section 21D, or with respect to any activity, event or other matter which is the subject of such license or permit and which activity, event or matter is carried out or exercised or is to be carried out or exercised on or about real estate whose owner has neglected or refused to pay any local taxes, fees, assessments, betterments or any other municipal charges.

Tax Collector Signature (confirms all taxes, liens, etc have been paid): _____ Date: _____

- Copy of Applicable Licenses
- Copy of Liability Insurance and Workman's Comp
- Application completely filled out and signed
- Check or Money Order for application fee



MASSACHUSETTS UNIFORM APPLICATION FOR A PERMIT TO PERFORM GAS FITTING WORK

G
TYPE OR
PRINT
CLEARLY

CITY _____ MA DATE _____ PERMIT # _____

JOBSITE ADDRESS _____ OWNER'S NAME _____

OWNER ADDRESS _____ TEL _____ FAX _____

OCCUPANCY TYPE COMMERCIAL EDUCATIONAL RESIDENTIAL

NEW: RENOVATION: REPLACEMENT: PLANS SUBMITTED: YES NO

APPLIANCES ↓	FLOORS →	BSM	1	2	3	4	5	6	7	8	9	10	11	12	13	14
BOILER																
BOOSTER																
CONVERSION BURNER																
COOK STOVE																
DIRECT VENT HEATER																
DRYER																
FIREPLACE																
FRYOLATOR																
FURNACE																
GENERATOR																
GRILLE																
INFRARED HEATER																
LABORATORY COCKS																
MAKEUP AIR UNIT																
OVEN																
POOL HEATER																
ROOM / SPACE HEATER																
ROOF TOP UNIT																
TEST																
UNIT HEATER																
UNVENTED ROOM HEATER																
WATER HEATER																
OTHER																

INSURANCE COVERAGE

I have a current liability insurance policy or its substantial equivalent which meets the requirements of MGL. Ch. 142 YES NO

IF YOU CHECKED YES, PLEASE INDICATE THE TYPE OF COVERAGE BY CHECKING THE APPROPRIATE BOX BELOW

LIABILITY INSURANCE POLICY OTHER TYPE INDEMNITY BOND

OWNER'S INSURANCE WAIVER: I am aware that the licensee does not have the insurance coverage required by Chapter 142 of the Massachusetts General Laws, and that my signature on this permit application waives this requirement.

CHECK ONE ONLY: OWNER AGENT

SIGNATURE OF OWNER OR AGENT

I hereby certify that all of the details and information I have submitted or entered regarding this application are true and accurate to the best of my knowledge and that all plumbing work and installations performed under the permit issued for this application will be in compliance with all Pertinent provision of the Massachusetts State Plumbing Code and Chapter 142 of the General Laws.

PLUMBER-GASFITTER NAME _____ LICENSE # _____ SIGNATURE _____

MP MGF JP JGF LPGI CORPORATION # _____ PARTNERSHIP # _____ LLC # _____

COMPANY NAME _____ ADDRESS _____

CITY _____ STATE _____ ZIP _____ TEL _____

FAX _____ CELL _____ EMAIL _____