

Town of Spencer, Massachusetts

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

APPLICATION FOR TEMPORARY TENTS

Location of Event

Name: _____ Telephone: _____

Address: _____

Start Date of Event: _____ End Date of Event: _____

Owner/ Organization of Event Location

Name: _____ Address: _____

Contact Person: _____ Telephone: _____

Company Erecting Tents

Name: _____ Address: _____

Contact Person: _____ Telephone: _____

Number of Tents Being Erected: _____

Size of Tents: _____

I hereby declare that the statements and information on the foregoing application are true and accurate to the best of my knowledge and belief. I agree to conform to all applicable laws of the Town of Spencer and the State of Massachusetts.

SIGNED UNDER THE PAINS AND PENALTIES OF PERJURY.

Signature of Applicant

Title

Date

For Official Use Only:

| |
|-----------------|
| Approval Stamp: |
|-----------------|

Permit # _____ Fee Paid: \$ _____

Check #: _____ Date Paid: _____



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 a 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 #: _____

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REQUIRED DOCUMENTATION

1. Completed "Application for Temporary Tents"
2. Certificates of Insurance from insurance companies covering persons involved in set-ups

TENTS: MUST HAVE IDENTIFICATION TAG WITH SERIAL NUMBER FIRE RATING AND TEST DATE. Tents with capacity of more than fifty (50) occupants must be equipped with proper emergency lighting. Fully enclosed tents must also have illuminated exist signs.

2015 International Building Code:

TEMPORARY STRUCTURES AND USES:

[A] **108.1 General.** The *building official* is authorized to issue a *permit* for temporary structures and temporary uses. Such *permits* shall be limited as to time of service, but shall not be permitted for more than 180 days. The *building official* is authorized to grant extensions for demonstrated cause.

[A] **108.2 Conformance.** Temporary structures and uses shall comply with the requirements in Section 3103.

[A] **108.3 Temporary power.** The *building official* is authorized to give permission to temporarily supply and use power in part of an electric installation before such installation has been fully completed and the final certificate of completion has been issued. The part covered by the temporary certificate shall comply with the requirements specified for temporary lighting, heat or power in NFPA 70.

[A] **108.4 Termination of approval.** The *building official* is authorized to terminate such *permit* for a temporary structure or use and to order the temporary structure or use to be discontinued.

TEMPORARY STRUCTURES:

3103.1 General. The provisions of Sections 3103.1 through 3103.4 shall apply to structures erected for a period of less than 180 days. Tents and other membrane structures erected for a period of less than 180 days shall comply with the *International Fire Code*. Those erected for a longer period of time shall comply with applicable sections of this code.

3103.1.1 Conformance. Temporary structures and uses shall conform to the structural strength, fire safety, *means of egress*, accessibility, light, ventilation and sanitary requirements of this code as necessary to ensure public health, safety and general welfare.

3103.1.2 Permit required. Temporary structures that cover an area greater than 120 square feet (11.16 m²), including connecting areas or spaces with a common *means of egress* or entrance that are used or intended to be used for the gathering together of 10 or more persons, shall not be erected, operated or maintained for any purpose without obtaining a *permit* from the *building official*.

3103.2 Construction documents. A *permit* application and *construction documents* shall be submitted for each installation of a temporary structure. The *construction documents* shall include a site plan indicating the location of the temporary structure and information delineating the *means of egress* and the *occupant load*.

3103.3 Location. Temporary structures shall be located in accordance with the requirements of Table 602 based on the *fire-resistance rating* of the *exterior walls* for the proposed type of construction.

3103.4 Means of egress. Temporary structures shall conform to the *means of egress* requirements of Chapter 10 and shall have an *exit access* travel distance of 100 feet (30 480 mm) or less.