COMMONWEALTH OF MASSACHUSETTS

CITY OF WESTFIELD
APPLICATION FOR CERTIFICATE OF INSPECTION

Date: _____

( ) Fee Required $ _____
( ) No Fee Required

In accordance with the provisions of the Massachusetts State Building Code, 780 CMR 110, I hereby apply for a Certificate of Inspection for the below-named premises located at the following address:

Street and Number: _____

Name of Premises: _____

Use of Occupancy: _____ Contact Number: _____

License(s) or Permit(s) required for the Premises by other governmental agencies (attach additional sheets, if necessary):

LICENSE or PERMIT	**AGENCY**

Certificate to be issued to: _____
Address: _____
Owner of record of building: _____
Address: _____
Name of present holder of certificate: _____
Name of agent, if any: _____
Applicant's name (please print): _____ Phone: _____
Title: _____ Date: _____

Required Submittals (check if document is attached) Check if not applicable

☐	Latest fire extinguisher inspection report or invoice	☐
☐	Latest fire sprinkler test report	☐
☐	Latest fire alarm and smoke/heat detector test report	☐
☐	Latest kitchen hood suppression system test report	☐
☐	Latest generator test report	☐
☐	Latest fire escape, exterior stairway, bridge and/or balcony inspection report	☐
☐	Latest bleacher inspection report	☐

_____ _____
Signature of Applicant or Authorized Agent Title

_____ _____
Print Name Date

INSTRUCTIONS

1. Make check payable to: City of Westfield
2. Return this application, all applicable test reports and your check to: City of Westfield, Building Department, 59 Court Street, Westfield, MA 01085
3. Application and fee must be submitted for each building to be certified
4. The Building Official shall be notified within ten (10) days of any change in the above information.