

PERMIT NO. _____

FEE _____

CK# _____

DATE _____

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*The Commonwealth of Massachusetts
Department of Public Safety*

BOARD OF FIRE PREVENTION REGULATIONS 527 CMR 12:00

APPLICATION FOR PERMIT TO INSTALL SECURITY SYSTEM

All work to be performed in accordance with the Massachusetts Electrical Code, 527 CMR 12:00

(Please print in ink or type all information)

Date _____

TOWN OF BRIDGEWATER (508) 697-0905

To the inspector of Wires: The undersigned applies for a permit to install a security system at the location described below.

Location (Street & Number) _____

Owner or Tenant _____

Owners Address _____

Is this permit in conjunction with a building permit? YES NO

Purpose of Building _____

Nature of the Proposed Security System _____

INSURANCE COVERAGE: Pursuant to the requirements of Massachusetts General Laws, I have a current Liability Policy including Completed Operations Coverage of its substantial equivalent. YES NO

I have submitted valid proof of same to this office. YES NO

INSURANCE BOND OTHER (Please Specify) _____ (expiration date) _____

Estimated Value of Electrical Work \$ _____

Work to Start _____ Inspection Date Requested: Rough _____ Final _____

Signed under the Penalties of Perjury:

FIRM NAME _____ Lic No. _____

Licensee _____ Signature _____ Lic No. _____

Security System Contractor License Number _____

Address _____ Bus. Tel. No. _____

_____ Alt. Tel. No. _____

OWNER'S INSURANCE WAIVER: I am aware that the Licensee does not have the Insurance coverage or its substantial equivalent as required by Massachusetts General Laws, and that my signature on this permit application waives this requirement. OWNER AGENT

(Signature of owner) Telephone No. _____