

CITY OF BOSTON

INSPECTIONAL SERVICES DEPARTMENT

Mayor Michelle Wu

SHEET METAL PERMIT APPLICATION

Date:				
Permit #:	Fee	e \$		
Estimated Cost of	f Work: \$			
	Y N		Plans Reviewed: Y N	
Business License #		Applicant Licer	Applicant License #:	
Business Inform	ation:	Property Own	er/Job Location Information	
Name:		Name:	Name:	
Address:		Address:		
City/Town:		City/Town:	WD:	
Telephone #:			Telephone #:	
·	· ·		s up to 10,000 s f/ 2 stories or less vnhouses Other	
Commercial: Of	ficeRetail	Industrial	Educational	
Linear Footage OR	under 200 lin ft	over 200 lin ft	Total lin ft	
Square Footage	under 200 sq ft	over 200 sq ft	Total sq ft	
Sheet metal wor	k to be completed:	New Work:	Renovation:	
HVAC	Metal Watershed R	hed Roofing Kitchen Exhaust System		
Metal Chimneys/	Vents	Air F	Air Balancing	
Please provide a	detailed description of t	he work to be done:		

City of Boston Inspectional Services Department 1010 Mass Ave. Boston, Mass 02119 617-635-5300 or 617-961-3271

INSURANCE COVERAGE I have a current <u>liability</u> insurance policy or its equivalent which meets the requirements of M.G.L. Ch 112. Y $N \square$ If you checked <u>YES</u>, indicate the type of coverage by checking the appropriate box below: A liability insurance policy Other type of indemnity Bond \square **OWNER'S INSURANCE WAIVER:** I am aware that the licensee does not have the insurance coverage required by M.G.L. Ch 112, and that my signature on this permit application waives this requirement. Check One Only: Signature of Owner or Owner's Agent Owner: Agent: By checking this box, 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 sheet metal work and installations performed under the permit issued for this application will be in compliance with all pertinent provisions of the Massachusetts State Building Code and Chapter 112 of the Massachusetts General Laws. Check @ www.mass.gov/dpl Duct inspection required prior to insulation installation YES \square $NO \square$ **Progress Inspections** Date Comments ___/___/_ **Final Inspection** Date Comments / / Approved by Inspector: _____ Date: ____ By: **Type of License:** ☐ Master-Unrestricted ☐ Journey-Unrestricted City/Town: ☐ Master-Restricted ☐ Journey-Restricted License #: ____ Permit #:

Linear Feet	Fee	Linear Feet	Fee
1-200	\$45	7001-7200	\$920
201-400	\$70	7201-7400	\$945
401-600	\$95	7401-7600	\$970
601-800	\$120	7601-7800	\$995
801-1000	\$145	7801-8000	\$1,020
1001-1200	\$170	8001-8200	\$1,045
1201-1400	\$195	8201-8400	\$1,070
1401-1600	\$220	8401-8600	\$1,095
1601-1800	\$245	8601-8800	\$1,120
1801-2000	\$270	8801-9000	\$1,145
2001-2200	\$295	9001-9200	\$1,170
2201-2400	\$320	9201-9400	\$1,195
2401-2600	\$345	9401-9600	\$1,220
2601-2800	\$370	9601-9800	\$1,245
2801-3000	\$395	9801-10000	\$1,270
3001-3200	\$420	10001-10200	\$1,295
3201-3400	\$445	10201-10400	\$1,320
3401-3600	\$470	10401-10600	\$1,345
3601-3800	\$495	10601-10800	\$1,370
3801-4000	\$520	10801-11000	\$1,395
4001-4200	\$545	11001-11200	\$1,420
4201-4400	\$570	11201-11400	\$1,445
4401-4600	\$595	11401-11600	\$1,470
4601-4800	\$620	11601-11800	\$1,495
4801-5000	\$645	11801-12000	\$1,520
5001-5200	\$670	12001-12200	\$1,545
5201-5400	\$695	12201-12400	\$1,570
5401-5600	\$720	12401-12600	\$1,595
5601-5800	\$745	12601-12800	\$1,620
5801-6000	\$770	12801-13000	\$1,645
6001-6200	\$795	13001-13200	\$1,670
6201-6400	\$820	13201-13400	\$1,695
6401-6600	\$845	13401-13600	\$1,720
6601-6800	\$870	13601-13800	\$1,745
6801-7000	\$895	13801-14000	\$1,770