



Commonwealth of Massachusetts
Department of Fire Services

BOARD OF FIRE PREVENTION REGULATIONS

Official Use Only	
Permit No. _____	
Occupancy and Fee Checked _____	
[Rev. 1/07]	(leave blank)

APPLICATION FOR PERMIT TO PERFORM ELECTRICAL WORK

All work to be performed in accordance with the Massachusetts Electrical Code (MEC), 527 CMR 12.00

(PLEASE PRINT IN INK OR TYPE ALL INFORMATION)

Date: _____

City or Town of: _____ To the Inspector of Wires:

By this application the undersigned gives notice of his or her intention to perform the electrical work described below.

Location (Street & Number) _____

Owner or Tenant _____ Telephone No. _____

Owner's Address _____

Is this permit in conjunction with a building permit? Yes No (Check Appropriate Box)

Purpose of Building _____ Utility Authorization No. _____

Existing Service Amps / Volts Overhead Undgrd No. of Meters

New Service Amps / Volts Overhead Undgrd No. of Meters

Number of Feeders and Ampacity _____

Location and Nature of Proposed Electrical Work: _____

Completion of the following table may be waived by the Inspector of Wires.

No. of Recessed Luminaires	No. of Ceil.-Susp. (Paddle) Fans	No. of Transformers	Total KVA
No. of Luminaire Outlets	No. of Hot Tubs	Generators	KVA
No. of Luminaires	Swimming Pool Above <input type="checkbox"/> In- <input type="checkbox"/> grnd. grnd.	No. of Emergency Lighting Battery Units	
No. of Receptacle Outlets	No. of Oil Burners	FIRE ALARMS	No. of Zones
No. of Switches	No. of Gas Burners	No. of Detection and Initiating Devices	
No. of Ranges	No. of Air Cond. Total Tons	No. of Alerting Devices	
No. of Waste Disposers	Heat Pump Number Tons KW Totals: 	No. of Self-Contained Detection/Alerting Devices	
No. of Dishwashers	Space/Area Heating KW	Local <input type="checkbox"/> Municipal Connection Other	
No. of Dryers	Heating Appliances KW	Security Systems:* No. of Devices or Equivalent	
No. of Water Heaters KW	No. of Signs No. of Ballasts	Data Wiring: No. of Devices or Equivalent	
No. Hydromassage Bathtubs	No. of Motors Total HP	Telecommunications Wiring: No. of Devices or Equivalent	
OTHER:			

Attach additional detail if desired, or as required by the Inspector of Wires.

Estimated Value of Electrical Work: _____ (When required by municipal policy.) Work to Start: _____

Inspections to be requested in accordance with MEC Rule 10, and upon completion.

INSURANCE COVERAGE: Unless waived by the Owner, no permit for the performance of electrical work may issue unless the licensee provides proof of liability insurance including "completed operation" coverage or its substantial equivalent. The undersigned certifies that such coverage is in force, and has exhibited proof of same to the permit issuing office.

CHECK ONE: INSURANCE BOND OTHER (Specify:) _____ (MUST INCLUDE A COPY)

I certify, under the pains and penalties of perjury, that the information on this application is true and complete.

FIRM NAME: _____ LIC. NO.: _____

Licensee: _____ Signature _____ LIC. NO.: _____

(If applicable, enter "exempt" in the license number line.)

Bus. Tel. No.: _____

Address: _____ Alt. Tel. No.: _____

*Per M.G.L. c. 147, s. 57-61, security work requires Department of Public Safety "S" License: Lic. No.: _____

OWNER'S INSURANCE WAIVER: I am aware that the Licensee does not have the liability insurance coverage normally required by law. By my signature below, I hereby waive this requirement. I am the (check one) owner owner's agent.

Owner/Agent
Signature: _____ Telephone Number _____ **PERMIT FEE: \$**

Email: _____

MUST PROVIDE CERTIFICATE OF INSURANCE & WORKERS' COMP. AFFIDAVIT - EVEN IF SOLE PROPRIETOR

Call for inspection: Wiring Inspector- Don Manseau 413-436-0051

**TOWN OF WARE
ELECTRICAL FEE SCHEDULE**

**Donald Manseau - Wiring Inspector
413-436-0051**

Residential:

New single family dwelling with overhead service	\$ 100.00
New single family dwelling with underground service	\$ 120.00
Underground service	\$ 40.00
Existing dwelling service upgrades, 1 or 2 family	\$ 40.00
New multi-family dwelling per unit/meter	\$ 90.00
Temporary service	\$ 40.00
Single family renovations, additions & alterations	\$ 75.00
Multi-family renovation, per unit	\$ 75.00
Central air conditioning systems	\$ 45.00
Electric range, dryer, water heater, etc., each	\$ 30.00
Portable generators	\$ 30.00
Fixed/permanent generators	\$ 50.00
Residential boiler / Furnace replacement	\$ 40.00
Mobile homes	\$ 75.00
Wind turbines	\$ 80.00
Solar	\$ 80.00
Data/Telecommunication	\$ 40.00

Swimming pools:

In-ground	\$ 80.00
Above ground	\$ 50.00

Wiring in Out-buildings:

Sheds	\$ 30.00
Garages	\$ 60.00
Barns	\$ 80.00

Security/Alarm systems:

New/Existing single family	\$ 40.00
New multi-family, per unit	\$ 40.00
Existing multi-family, per unit	\$ 40.00
Commercial	\$ 1.50 per 1,000 SF plus \$ 40.00

Commercial, Educational, Churches, etc.:

New construction	\$ 8.00 per 1,000 SF plus \$ 75.00
Additions, alterations & renovations	\$ 8.00 per 1,000 SF plus \$ 75.00
Each additional storefront or business/office	\$ 60.00
Maintenance permits yearly	\$ 600.00
Generators, Commercial/Industrial	\$ 100.00
Cell/Communication Towers, per meter	\$ 100.00
Service entrance/Main switch, per amp:	
100 amp and 200 amp	\$ 40.00
400 amp and 600 amp	\$ 60.00
1000 amp & up	\$ 200.00
Signs, each	\$ 35.00
Traffic lights per light unit/installation	\$ 35.00
Data/Telecommunication	\$ 40.00
Trench inspections	\$ 60.00

Temporary Wiring

for Carnivals, Flea Markets, etc.	\$ 100.00
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All applications must be legible and complete with correct date and information pertaining to work performed and must include a Utility Authorization Number (if applicable)

Upgrade or new electrical **400AMP** service will require load calculations to be submitted.

All residential fees include 1 rough & 1 final inspection; additional inspections are \$40 each (overhead service)

All other inspection fees will be reviewed by the Electrical Inspector.

All Electrical Permits expire one year from date of permit application submission.

A Certificate of Liability must be on file for all applications unless a waiver disclosure is signed by property owner (MGL c141 s8)

A Workers Comp Form must be submitted with the application, even if sole proprietor.

All mechanical grounds shall be made up in all boxes before the rough inspection.

Make all checks payable to the Town of Ware.