



**TOWN OF LEE**  
 BUILDING DEPARTMENT  
 32 MAIN ST.  
 LEE MASS. 01238  
 (413) 243-5518 FAX (413) 243-5523

**MECHANICAL PERMIT SUPPLEMENT**

IMPORTANT - Applicant to complete ALL applicable items.

Shaded boxes are FOR OFFICIAL USE ONLY.

Permit Number		1. Project Name				
2. Project Address			Floor/Suite Number		3. Date Applied	
4. Owner				5. Phone: Home - Work -		
6. Owners Mailing Address (if different from project address)						
7. Contractor Name - Phone -			8. Business Address			
9. License Type		10. Ma. License #		11. Signature		
				12. Workers Compensation Affidavit Submitted <input type="checkbox"/> Yes <input type="checkbox"/> No		
13. Project Description  Submit heat loss and heat gain calculation on a separate sheet(required)						
14. Code Edition		15. Use Group		16. Construction Type		
18. Type of Work: <input type="checkbox"/> New <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Replacement <input type="checkbox"/> Other					17. <input type="checkbox"/> Residential <input type="checkbox"/> Commercial	
19. Estimated Cost \$						
20. <input type="checkbox"/> Existing Building <input type="checkbox"/> New Building		21. Number of: Diffusers _____ Registers _____ Grilles _____				
22. Equipment Data:						
	TYPE	MANUFACTURER	MODEL	K-BTU'S	WEIGHT	LOCATION
1						
2						
3						
4						

**AFFIDAVIT**

I hereby certify that I have the authority to make the foregoing application and that the application, to the best of my knowledge, is complete and correct and that the permitted construction will conform to the regulations in the Uniform Statewide Building Code and all applicable ordinances.

\_\_\_\_\_  
 Signature of Owner or Authorized Agent

\_\_\_\_\_  
 Printed Name of Person Applying for Permit

\_\_\_\_\_  
 Address

\_\_\_\_\_  
 Phone

APPROVALS		PERMIT FEES	
Engineer:		TOTAL	\$
Date Approved:		Deposit Rec'd	\$
Date Issued:		Deposit Date:	
Engineer Aide	Rec'd By:	Notes:	
	Issued By:		
Drawings Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No			