

Dracut Online Permitting Instructions.

Please read carefully before proceeding.

1. **Complete the wiring permit below in the normal manner, including the fee calculator on Page 3. Sign when complete.** (Red fields are required, blue fields are not, but are helpful if you have the information.)
2. Once the form is complete, save it by going to **File**, then **Save As**.
Important: You will need to know where you saved it for Step 3.
If you have other documents to include such as WC affidavit, plans, etc. please also save them as PDFs. You will be able to upload them after paying for the permit.
3. Next, log in to the [Dracut Online Permitting website](#). Follow the instructions to upload your saved PDF form. It will then allow you to pay for the permit.
4. Once you have completed the payment you will be able to upload any other documents (as PDFs), and download and print a copy of the submitted application for your records.
When the application has been approved you will receive an email with the permit number.

Thank you.

Please continue below.



Commonwealth of Massachusetts
Department of Fire Services

BOARD OF FIRE PREVENTION REGULATIONS

Tracking No. _____

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: DRACUT

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 grnd. <input type="checkbox"/> In-grnd. <input type="checkbox"/>	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 Totals: Number Tons KW	No. of Self-Contained Detection/Alerting Devices	
No. of Dishwashers	Space/Area Heating KW	Local <input type="checkbox"/> Municipal Connection <input type="checkbox"/> 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:			

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:)

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.) Complete all edits before signing! 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 _____ Insurance waiver must use paper form. Telephone No. _____ **PERMIT FEE: \$**

WIRING PERMIT FEE CALCULATOR

	A	B	C	D
1	RESIDENTIAL	COST	COUNT	SUB TOTAL
2				
3	Service change, 100 amps			
4	Service Change, 200 amps			
5	Service change, 400 amps			
6				
7	New Home, 100 amps			
8	New Home, 200amps			
9	New Home, 400 amps			
10	Multi-family dwelling, per unit			
11				
12	Temporary Service			
13	Additions / Renovations			
14	Replacement furnace, HW heater, boiler			
15	All other work	\$50 plus \$10/\$1000		
16				
17	COMMERCIAL			
18				
19	Interior fit-ups, renovations, etc.	\$50 plus \$10/\$1000		
20	Service changes	\$1 per amp		
21	Service changes, additional amperage	\$1 per amp		
22	New construction	\$1 per amp		
23				
24			TOTAL	