

## TOWN OF MILLBURY

127 ELM STREET • MILLBURY, MA 01527 • TEL. 508-865-0438 • FAX. 508-865-0857 • EMAIL einspector@townofmillbury.net

## **INSPECTION REQUEST FORM**

FORM MUST BE FILLED OUT COMPLETELY

DATE OF REQUESTR	EQUESTED BY		
CIRCLE ONE Building	Plumbing	Gas	Wiring
LOCATION:	SH	OPPES UNIT#_	
PROPERTY OWNER:	PH	ONE	
CONTRACTOR:  PERMIT HOLDER	PI-	IONE	
LICENSE #	EXPIR	ATION	
TYPE OF INSPECTION: CIRCLE ONE  Excavation Trench  Foundation Underground  Re-Bar Piping  Footings Mechanical ROUGH/FINAL  Rough Frame Gas ROUGH/TEST/ FINAL  Insulation Plumbing ROUGH/TEST/FINAL  In-ground Pool ROUGH/FINAL Electric ROUGH/FINAL/POOL BOND  Above Ground Pool ROUGH/FINAL  Final building Stove type  OTHER			
New House Addition Remodel/R Detailed description of project		_	_
Official Use Only PASSED FAILED Inspector Remarks:		date	time

<sup>\*</sup>ELECTRIC INSPECTIONS: MON/WED/FRI 4:30-7:30pm, OR BY SPEC. APPT.

<sup>\*</sup>GAS/PLUMBING INSPECTIONS: MON/WED/FRI 8:00-9:30am, SAT 9:00-11:00 IF NEEDED OR BY SPEC APPT.

<sup>\*</sup>LICENSED GASFITTERS/ PLUMBERS ONLY MAY REQUEST AN INSPECTION FOR PLUMBING/GAS WORK.

<sup>\*</sup>PERMIT HOLDERS ONLY MAY REQUEST AN INSPECTION FOR ALL OTHER WORK