# CITY OF CAMBRIDGE INSPECTIONAL SERVICES DEPARTMENT 831 Massachusetts Avenue Cambridge, MA 02139 617-349-6100

### Homeowners' Ownership Affidavit

l,	, certify under the pains and
penalt	ties of perjury that I am the owner of record of the real property located at (full address)
	, in Cambridge, Massachusetts (the "Property"),
OR	
	n not the sole owner of the Property, I certify that I am authorized by all other owners of the erty to apply for building and/or other permits for the Property on behalf of all such other owners.
List yo	our Full Name:
	Address:
	e check the appropriate box below and if applicable fill in the full name(s) and address(es) of all rs of the Property.
	I am the sole owner of the above referenced Property,  OR  I am an owner of the above referenced Property and I am authorized to sign on behalf of all other owners of the Property which are listed below:
List th	ne full name(s) and address(es) of all other owners of the Property:
	I hereby certify under the pains and penalties of perjury that neither I nor any of the owners of the
	Property listed herein own or have ever owned any land that is adjacent to or adjoining the Property. If this box is not checked <u>each</u> owner of the Property will be required to complete the Affidavit of Ownership of Adjacent or Adjoining Properties.
Please	e check if you are authorizing an agent to apply for a building permit:
	On behalf of myself and all other owners of the Property, I hereby authorize
	Full Name of Homogypor's Authorized Agent License Number/Pegistration Number

as my	Architect	Registered home improvement	contractor				
	Engineer	Other licensed design professio	nal				
License	ed by:						
to act as my lawful agent in this matter and to sign all documents on my behalf and on behalf of all other owners of the Property for the purpose of applying for a building and/or other permit for work to be performed at the Property.							
	y under the pains and l te and complete.	penalties of perjury that all the informa	ation that I have provided is true,				
	Homeowner's Au	thorized Signature	Date				
Homeo	owner's Address:						

If you are a homeowner performing work for which a building permit is required you must complete the Homeowner's Affidavit to Perform Construction Work.

# CITY OF CAMBRIDGE INSPECTIONAL SERVICES DEPARTMENT 831 Massachusetts Avenue Cambridge, MA 02139 617-349-6100

#### Homeowner's Affidavit to Perform Construction Work

This Affidavit must be completed by each homeowner of the subject property who wishes to perform work without hiring a licensed home improvement contractor or other licensed design professional.

I hereby certify under the pains and penalties of perjury the following information:

I am the owner of record of the real property located at (full address)
in Cambridge, Massachusetts (the "Property")
If I am not the sole owner of the Property, I certify that I am authorized by all other owners of the Property to apply for building and/or other permits for the Property on behalf of all such other owners.
I am a homeowner within the meaning of 780 CMR 108.3.5.1, which is defined as follows: "Person(s) who owns a parcel of land on which he/she resides or intends to reside, on which there is, or is intended to be, a one or two family dwelling, attached or detached structures accessory to such use and/or farm structures. A person who constructs more than one home in a two year period shall not be considered a homeowner."
I understand and agree to accept responsibility for all work performed under the building permit for which I am applying including but not limited to acting as construction supervisor for any person that I hire to perform such work pursuant to the licensing exemption provisions set forth in 780 CMR 110.R5 1.3
I understand and agree to comply with the State Building Code and other applicable laws, codes, by- laws, rules and regulations. I understand that by obtaining my own building permit, I cannot receive payment from the Guaranty Fund under the Home Improvement Contractor Law (M.G.L. ch. 142A, § 5).
I understand and agree to comply with the City of Cambridge Department of Inspectional Services' inspection procedures and requirements.
I certify under the pains and penalties of perjury that all the information that I have provided is true, accurate and complete.
Homeowner's Authorized Signature:
Homeowner's Address:
Date:
Accurate and complete.  Homeowner's Authorized Signature:  Homeowner's Address:

<sup>\*</sup>Note: all structures of 35,000 cubic feet or larger will be required to comply with State Building Code Construction Control Regulations

## CITY OF CAMBRIDGE INSPECTIONAL SERVICES DEPARTMENT

### 831 Massachusetts Avenue Cambridge, MA 02139 617-349-6100

#### Affidavit of Ownership of Adjacent or Adjoining Properties

This affidavit must be completed by every owner of record of the property which is the subject of this building permit application (the "Subject Property") who owns or has ever owned any real property that is located adjacent to or adjoining the Subject Property.

I certify under the pains and penalties of perjury	that I am now and have been an ow	ner of record
of	(address of the	Subject Property),
in Cambridge, Massachusetts since	(date).	
I am now or previously have been an owner of radjacent to or adjoining the Subject Property:	ecord of the following real property(i	ies) located
Please complete the below information as to ea own or have previously owned.	ch such adjacent or adjoining proper	ty that you now
(Box) I acquired an ownership interest in the	following adjacent or adjoining prope	erty(ies):
	(property address) on	(date)
	(property address) on	(date)
	(property address) on	(date)
(Box) I sold or transferred my ownership inter	rest in the following adjacent or adjoi	ning property(ies):
	(property address) on	(date)
	(property address) on	(date)
	(property address) on	(date)
I certify under the pains and penalties of perjury accurate and complete.	$\prime$ that all the information that I have ${\mathfrak p}$	provided is true,
Homeowner's Authorized Signature:		
Homeowner's Address:		
Date		