

How to Apply for a Building Permit Online:

1. After registering for an account, log in to <https://aca3.accela.com/brookline>.

The screenshot shows the top navigation bar with 'Home', 'Building', 'Board Of Health', 'Licenses', 'Fire', 'Planning', 'Clerk Office', and 'more'. Below the navigation is an 'Advanced Search' bar. The main content area is split into two columns. The left column contains a welcome message and 'Online Payment Information'. The right column is a 'Login' form with fields for 'User Name or E-mail' and 'Password', a 'Login »' button, and links for 'Remember me on this computer', 'I've forgotten my password', and 'New Users: Register for an Account'.

2. Click the Building tab. Click Create an Application. Check the box next to I have Read and Accepted the above terms. Click Continue Application.

The screenshot shows the 'Building' tab selected in the navigation bar. Below it is a 'Create an Application' button and a 'Search Applications' bar. The main content area is titled 'Online Application' and contains a welcome message, a disclaimer, and a checkbox for 'I have read and accepted the above terms'. Below the checkbox is a 'Continue Application »' button.

3. Click the Building category and select the appropriate permit type – then click Continue Application

Home **Building** Board Of Health Licenses Fire Planning Clerk Office more ▾

Create an Application Search Applications

Select a Record Type

Choose one of the following available record types. For assistance or to apply for a record type not listed below please contact us.

Search

- ▼ Building
 - Certificate of Inspection Application
 - Certificate of Occupancy
 - Commercial Building
 - Commercial Electrical
 - Commercial Gas
 - Commercial Mechanical
 - Commercial Plumbing
 - Condo Conversion Certificate
 - Plan Review/Denial
 - Residential Building
 - Residential Electrical
 - Residential Gas
 - Residential Mechanical
 - Residential Plumbing
 - Sign/Facade Permit - Permanent
 - Sign/Facade Permit - Temporary
 - Sprinkler

Continue Application »

4. Type in a street name (name only – no “way type”) and or street number then click Search. Once the valid address is found, parcel ID and owner info will be automatically filled in. Click Continue Application.

Home **Building** Board Of Health Licenses Fire Planning Clerk Office more ▾

Create an Application Search Applications

Residential Building

1 Location 2 Contacts 3 Permit Details 4 Attachments 5 Review 6 7

Step 1: Location > Location & Owner

Show Map

* indicates a required field.

Physical Address

To search for a valid address in the system, please do **NOT** type in City, State and Zip. Just type in Street No. and Street Name without suffix (i.e. Washington). Then click the blue Search button. If you are not sure about the street number, just type in the street name without suffix, click the Search button and you will be prompted with a list of available addresses which match that name to choose from. If you know the suffix, please spell it out (i.e. Washington Street) in the street name field.

* Street No.: 11 * Street Name: pierce

City: State: --Select-- Zip:

Search **Clear**

Building Department

Directions

Physical Address: [View Map](#)

333 Washington St.
Third Floor
Brookline, MA 02445

Phone:

617-730-2100

Fax:

617-739-7542

Hours

Monday - Thursday
8 a.m. - 5 p.m.

Friday
8 a.m. - 12:30 p.m.

Select Language ▼

Google Translate

Staff

Name	Title	Email	Phone
<u>Bennett, Daniel</u>	Building Commissioner	<u>dbennett@brooklinema.gov</u>	<u>617-730-2100</u>
<u>Campbell, Paul R.</u>	Deputy Building Commissioner	<u>prcampbell@brooklinema.gov</u>	<u>617-730-2104</u>
<u>McDonough, Brian</u>	Building Official	<u>bmcdonough@brooklinema.gov</u>	<u>617-730-2094</u>
<u>Noel, Emily</u>	Building Official	<u>enoel@brooklinema.gov</u>	<u>617-730-2109</u>
<u>Granai, Jason</u>	Building Official	<u>jgranai@brooklinema.gov</u>	<u>617-730-2095</u>
<u>Murray, Ted</u>	Building Official	<u>emurray@brooklinema.gov</u>	<u>617-730-2016</u>
<u>Richard, Brian</u>	Electrical Inspector	<u>brichard@brooklinema.gov</u>	<u>617-730-2110</u>
<u>Dabritz, Karl</u>	Plumbing and Gas Fitting Inspector	<u>KDabritz@brooklinema.gov</u>	<u>617-730-2105</u>
<u>Cheng, Grace</u>	Admin Head Clerk	<u>gcheng@brooklinema.gov</u>	<u>617-730-2100</u>
<u>Curtis, Kristen</u>	Senior Clerk Typist	<u>kcurtis@brooklinema.gov</u>	<u>617-730.2102</u>

Public Buildings Staff**Physical Address:**

333 Washington St.
Third Floor
Brookline, MA 02445

Mailing Address:

333 Washington St.
Third Floor
Brookline, MA 02445

Phone:

617-730-2420

Fax:
617-739-7542

Hours
Monday - Thursday
8 am to 5 pm
Friday
8 am to 12:30 pm

Staff

Name	Title	Email	Phone
<u>Simmons, Charlie</u>	Director of Public Buildings	<u>csimmons@brooklinema.gov</u>	<u>617-730-2420</u>
<u>Yan, Lap</u>	Deputy Director of Capital	<u>lyan@brookline.ma.gov</u>	<u>617-730-2044</u>
<u>Masak, Raymond</u>	Project Manager	<u>rmasak@brooklinema.gov</u>	<u>617-264-6449</u>
<u>Gooding, Sara</u>	Operations Manager	<u>sgooding@brooklinema.gov</u>	<u>617-879-4799</u>
<u>Gomes, Camden</u>	Energy Systems Manager	<u>cgomes@brooklinema.gov</u>	<u>617-264-6484</u>
<u>McDonald, Beth</u>	Admin Head Clerk	<u>bmcDonald@brooklinema.gov</u>	<u>617-730-2420</u>
<u>Tolson, Joan</u>	Bookkeeper	<u>jtolson@brooklinema.gov</u>	<u>617-264-6471</u>

[Return to Staff Directory](#)

 **Government Websites by CivicPlus®**

Permit & Fee Schedule

Fee Schedule Effective 7-18-22

THE MINIMUM PERMIT FEE IS \$50.00

Permit	Fee
Work started without proper permits	\$50 per \$1,000 of Construction Value or a fraction thereof
Failure to call for a final inspection within ten (10) working days after completion of work	\$50
Re-Inspection Fee	\$50 per inspection
Building permit	\$20 per \$1,000 of Construction Value or fraction thereof
Electrical permit	\$20 per \$1,000 of Construction Value or fraction thereof

Select Language ▼

Google Translate

Permit	Fee
Plumbing permit	\$20 per \$1,000 of Construction Value or fraction thereof
Gas fitting permit	\$20 per \$1,000 of Construction Value or fraction thereof
Mechanical permit	\$20 per \$1,000 of Construction Value or fraction thereof
Sprinkler permit	\$20 per \$1,000 of Construction Value or fraction thereof
Demolition permit	\$20 per \$1,000 of Construction Value or fraction thereof
Fire Alarm System	\$20 per \$1,000 of Construction Value or fraction thereof
Smoke Detectors	\$20 per \$1,000 of Construction Value or fraction thereof

Plan Review Filing Fee: (For Board of Appeals Cases)

A) Alteration	\$75 per 1,000 sq. ft. gross floor area (Min. \$100)
B) New Construction	\$150 per 1,000 sq. ft. gross floor area (Min. \$200)
C) Off-Street Parking	\$25 per Space (Min. \$100)
D) Subdivision, other	\$200

Design Review Approval Filing Fee:

Signs:

Illuminated Signs	\$300
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Permit	Fee
Non-Illuminated Signs < 10 sq. ft. in area	\$100
Non-Illuminated Signs > 10 sq. ft. in area	\$125
<u>Commercial Facades:</u>	
Awnings	\$300
Other	\$300
Certificate of Use and Occupancy of existing Structures per MSBC	\$100 + \$15 per Dwelling Unit
Certificate of Inspection and Certificate of Structures per MSBC 108.5.1	\$100 + \$15 per Dwelling Unit
Certificate of Use and Occupancy	\$50 per Dwelling Unit
Certificate of Use and Occupancy for Commercial Units	\$50 + \$25 per 1,000 sq. ft.
Temporary or Partial Certificate of Use	\$50
Temporary or Partial Certificate of Use and Occupancy	\$50 per month
Lodging House Inspection	\$100 up to five (5) units + \$5 per additional unit beyond five (5)
Condominium Certificate of Inspection as required in Article XIX Section 34 of the Town of Brookline By-Law	\$100 per Dwelling Unit

 Government Websites by [CivicPlus®](#)



TOWN of BROOKLINE
Massachusetts

BUILDING DEPARTMENT

Daniel F. Bennett
Building Commissioner

AFFIDAVIT FOR FINAL COST OF CONSTRUCTION

To the Building Commissioner,

In accordance with 780 CMR section 109.0/R109.3 of the Massachusetts State Building Code, the total estimated cost of construction, including all related construction costs* of the building located at _____ and constructed, reconstructed, altered, repaired or extended under building permit no. _____ amounts to \$ _____.

I, _____, being the person referred to as the owner identified below, do solemnly swear that the statements made herein are strictly true, correct and made in good faith.

*Related construction costs include all work done with or concurrently with the work contemplated by the Building Permit including construction, reconstruction, repairs, demolition, heating, air conditioning, misc. site improvements, etc. Furnishings and portable equipment are not part of the total construction costs.

Signature and address of Owner

Subscribed and sworn before me this _____ day of _____.

Notary Public Signature

My Commission Expires

Notary Public Print Name

OFFICE USE:

Final Cost: _____

Original Estimate cost of construction: _____

Cost Difference: _____

Additional Fee Required: _____

TO AMEND FEE UNDER PERMIT # _____



TOWN of BROOKLINE
Massachusetts
BUILDING DEPARTMENT

Daniel F. Bennett
 Building Commissioner

APPLICATION FOR CERTIFICATE OF OCCUPANCY

Certificate of Occupancy No: _____ Date Issued: _____

Fee (calculated from the reverse side): \$ _____ Receipt No: _____

I hereby request a Certificate of Occupancy pursuant to 780 CMR The Massachusetts State Building Code Section R110.0 or 111.0, as amended, and that the information provided is true and accurate.

 Signature Date

Location: _____ **Unit No:** _____ **Floor No:** _____

Proposed Use: Residential Attached Detached Commercial Size (sq ft): _____

Issue to: Property Owner Contractor Lessee/Tenant

Construction Type: Wood Masonry Structure Steel Concrete Other

Applicant's Name: _____ **d/b/a Name:** _____

Town/City/Zip: _____ **Phone:** _____

Contractor Name: _____ **License #:** _____

Address: _____ **Phone:** _____

Town/City/Zip: _____ **Cell Phone:** _____

Building Permit Number: _____ **Inspector:** _____

Plumbing Permit Number: _____ **Inspector:** _____

Gas Fitting Permit Number: _____ **Inspector:** _____

Wiring Permit Number: _____ **Inspector:** _____

Sprinkler Permit Number: _____ **Inspector:** _____

Mechanical Permit Number: _____ **Inspector:** _____

Health Dept. Sign Off: _____ **Inspector:** _____

Fire Dept. Sign Off: _____ **Inspector:** _____

Engineering Dept. Sign Off: _____ **Approval:** _____

Water/Sewer Dept. Sign Off: _____ **Approval:** _____

Planning Dept. Sign Off: _____ **Approval:** _____

Conservation Sign Off: _____ **Approval:** _____

CERTIFICATE OF OCCUPANCY FEE CALCULATION

1. Certificates of Occupancy of existing structure:

No. of Units _____ x \$50.00 = \$ _____

2. Certificate of Occupancy per dwelling unit - \$50.00 each:

No. of Units _____ x \$50.00 = \$ _____

3. Certificate of Occupancy for Commercial Building/Space, \$50 plus \$25 for each 1,000 sq ft gross floor area:

\$50.00 + (\$25.00 x _____ sq ft) = \$ _____
(each 1,000 sq ft)

4. Temporary or Partial Certificate of Occupancy (min.3 months), \$50 / month per unit:

\$50.00 x _____ x _____ = \$ _____
(no. of months) (no. of units)



TOWN of BROOKLINE
Massachusetts

BUILDING DEPARTMENT

Daniel F. Bennett
Building Commissioner

Paul R. Campbell
Deputy Building Commissioner

DEMOLITION APPROVALS

DATE _____

LOCATION _____

FIRE DEPARTMENT _____

HEALTH DEPARTMENT _____

PRESERVATION COMMISSION _____

WATER/SEWER DIVISION _____

BUILDING DEPT. REFUSE/DEBRIS APPLICATION _____

**APPLICANT IS RESPONSIBLE FOR WRITTEN RELEASE OF THE
FOLLOWING:**

NATIONAL GRID (800) 232-5325

EVERSOURCE (800) 592-2000

VERIZON (800) 870-9999

COMCAST (CABLE) (888) 633-4266

RCN (CABLE & PHONE) (800) 746-4726

**WRITTEN RELEASE REQUIRED FROM EACH OF THE ABOVE
BEFORE DEMOLITION PERMIT MAY BE ISSUED**

TOWN of BROOKLINE
Massachusetts

BUILDING DEPARTMENT

To: FIRE DEPARTMENT

Date: _____

An application has been received to demolish the building at:

It is required that the Fire Department approves same.

Please sign and return to this department after above has been approved in order that the Building Permit may be issued.

APPROVAL OF FIRE DEPARTMENT

Fire Chief

Date

TOWN of BROOKLINE
Massachusetts

BUILDING DEPARTMENT

To: HEALTH DEPARTMENT

Date: _____

An application has been received to demolish the building at:

It is required that the Health Department approves same.

Please sign and return to this department after above has been approved in order that the Building Permit may be issued.

APPROVAL OF HEALTH DEPARTMENT

Health Department

Date

TOWN of BROOKLINE
Massachusetts

BUILDING DEPARTMENT

To: PRESERVATION COMMISSION

Date: _____

An application has been received to demolish the building at:

It is required that the Preservation Commission approves same.

Please sign and return to this department after above has been approved in order that the Building Permit may be issued.

APPROVAL OF PRESERVATION COMMISSION

Preservation Commission

Date

TOWN of BROOKLINE
Massachusetts

BUILDING DEPARTMENT

To: WATER & SEWER DEPARTMENT

Date: _____

An application has been received to demolish the building at:

It is required that the Water & Sewer Department approves same.

Please sign and return to this department after above has been approved in order that the Building Permit may be issued.

APPROVAL OF WATER & SEWER DEPARTMENT

Director of Water & Sewer Department

Date

TOWN of BROOKLINE
Massachusetts

BUILDING DEPARTMENT

SOLID WASTE DISPOSAL FORM

As a condition of issuing a permit, 780 CMR Sec 105.3.1 #4 for the construction, demolition, renovation, rehabilitation or other alteration of a building or structure, M.G.L. c. 40, § 54, requires that the debris resulting therefrom shall be disposed in a properly licensed solid waste disposal facility as defined by M.G.L. c. 111, § 150A.

I hereby acknowledge that the referenced building permit issued to construct, demolish, renovate, rehabilitate or alter a building or structure is conditioned on compliance with M.G.L. c. 40, § 54.

Building Permit Number (to be completed by office staff)

Construction Site Address

Name and Location of Solid Waste Disposal Facility

Signature of Permit Applicant

Date



TOWN OF BROOKLINE

PERMIT NO **BP-2024-000703**

ISSUE DATE **5/21/2024**

APPLICANT **Paul McDonald**

Building Department
(617) 730-2100

Area Insp.: **Jason Granai**

Insp. Phone: **617-730-2095**

CO Required:

BUILDING PERMIT

JOB WEATHER CARD

AT (LOCATION) 400 HEATH STREET	ZONING DISTRICT S-40 SINGLE-FAMILY	Type: Commercial Building
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MAP BLOCK LOT **440-39-01**

BUILDING IS TO BE: **CONST TYPE II A**

USE GROUP **Educational**

TO PERFORM THE FOLLOWING WORK:

Bathroom upgrades at Messina College West Village Bldgs. 1,2,4,5,6 COMPLIANT WITH 780 CMR AND BROOKLINE ZONING BY LAWS

CONTRACTOR	
LICENSE	United States CSL
Paul McDonald Lee Kennedy Co Quincy, MA 02171 PHONE: 6179086234	

AREA (SQ FT) **1,559,430.00**

EST COST(\$) **1900000**

PERMIT FEE(\$) **38,000.00**

OWNER: **TRUSTEES OF BOSTON COLLEGE**

ADDRESS: **140 COMMONWEALTH AVE
CHESTNUT HILL, MA 02467**

POST THIS CARD SO IT IS VISIBLE FROM STREET

BUILDING INSPECTION APPROVALS

Electric Rough: Final:	Gas Rough: Final:	Plumbing Rough: Final:	Building Excavation: Footings: Foundation: Rough Frame: Firestopping/Fireblocking: Insulation: Final:
D.P.W. Water: Sewer:	Fire Smoke: Alarm: Sprinklers:	Health Misc. Dept / Insp Final:	

THIS PERMIT MAY BE REVOKED BY THE TOWN OF BROOKLINE UPON VIOLATION OF ANY OF ITS RULES AND REGULATIONS. THIS CARD IS THE PROPERTY OF THE TOWN OF BROOKLINE AND MUST BE RETURNED TO THE BUILDING DEPARTMENT AT THE TIME OF JOB COMPLETION.

MGL CH142A HOME IMPROVEMENT CONTRACTOR REGISTRATION. PERSONS CONTRACTING WITH UNREGISTERED CONTRACTORS DO NOT HAVE ACCESS TO THE GUARANTY FUND IN THE EVENT OF A DISPUTE.

Signature: *Jason Granai*

ALL WORK SHALL CONFORM TO THE STAMPED OR ENDORSED APPLICATION AND PLANS FOR WHICH THIS PERMIT HAS BEEN ISSUED (107.4). THIS PERMIT WILL BECOME NULL AND VOID IF CONSTRUCTION IS NOT STARTED WITHIN 180 DAYS FROM THE DATE THE PERMIT WAS ISSUED (105.5). APPROVED PLANS MUST BE RETAINED ON THE JOB AND THIS CARD MUST BE DISPLAYED UNTIL FINAL INSPECTION (105.7, 107.3.1). SEPARATE PERMITS ARE REQUIRED FOR PLUMBING, GAS, ELECTRICAL, SHEETMETAL, MECHANICAL AND SPRINKLER INSTALLATIONS. THIS PERMIT CONVEYS NO RIGHT TO OCCUPY ANY STREET, ALLEY OR SIDEWALK. A DEBRIS REMOVAL FORM AS REQUIRED BY THE STATE BUILDING CODE MUST BE ON FILE WITH THE PERMIT (105.3.1.4)

- A. EXCAVATION BEFORE POURING OF CONCRETE (24 hr. notification before time of delivery)
- B. FOOTING - SOIL - REBAR (if applicable)
- C. FOUNDATION BEFORE BACKFILLING (Foundation drain / dampproofing in place)
** FOUNDATION AS-BUILT **
** MUST BE SUBMITTED PRIOR TO PLACING SILL **
(Failure to submit at this time, contractor/homeowner cont. at own risk)
- E. ROUGH WIRING - ROUGH PLUMBING / GAS - ROUGH FRAME (drywall fire rated assembly / rated recessed lighting if applicable)
ROUGH MECHANICAL - SPRINKLER (WEATHER TIGHT SHELL & FIRESTOPPING IN PLACE)
- F. INSULATION
- G. FINISH WIRING, PLUMBING / GAS, MECHANICAL AND SPRINKLER

§8.15.6 CONSTRUCTION HOURS 7 A.M. to 7 P.M. Monday thru Friday, and 8:30 A.M. to 6:00 P.M. Saturdays, Sundays and Holidays.

§7.5.8 IDLING OF MOTOR VEHICLES: No person shall permit the unnecessary operation of the engine of a motor vehicle while said vehicle is stopped in excess of five minutes.

FEES DESCRIPTION	RECEIPT NUMBER	DATE PAYMENT	CHECK NUMBER	AMOUNT
Building Permit (Enter BLDG Portion of Value ONLY - \$)	1715619	5/20/2024		\$38,000.00