

# City of Malden

Plans must be Filled and Approved by this Department before a Permit for Occupancy will be granted

## Application for Certificate of Occupancy

Malden \_\_\_\_\_ 20\_\_\_\_\_

To the Inspector of Building:

The undersigned hereby applies for a permit to occupy according to the provision of the City Ordinance and the following specifications:

1. Owner's Name \_\_\_\_\_
2. Owner's Address \_\_\_\_\_ Owner's Phone No. \_\_\_\_\_
3. Owner's Email \_\_\_\_\_
4. Occupant's Name \_\_\_\_\_
5. Occupant's Address \_\_\_\_\_ Occupant's Phone No. \_\_\_\_\_
6. Occupants Email \_\_\_\_\_
7. What is the location's No. \_\_\_\_\_
8. What is the purpose of the building? \_\_\_\_\_
9. Zoning \_\_\_\_\_
10. If a dwelling, how many families? \_\_\_\_\_

\*Signature of  
Applicant \_\_\_\_\_  
No. \_\_\_\_\_

REMARKS:

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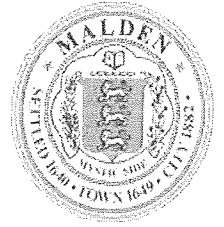
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# City of Malden

Massachusetts

Building Department



Malden Government Center  
Two Hundred Pleasant Street  
Malden Massachusetts 02148

Phone  
(781)-397-7030

Building Department  
Occupancy Approval List

Fax  
(781)-497-7193

Department \_\_\_\_\_ Signature and Notes \_\_\_\_\_ Date \_\_\_\_\_

Planning Board: \_\_\_\_\_

City Engineer: \_\_\_\_\_

Water Department: \_\_\_\_\_

Fire Department: \_\_\_\_\_

Board of Health: \_\_\_\_\_

Wire Department: \_\_\_\_\_

Plumbing Department: \_\_\_\_\_

Malden Redev. Authority: \_\_\_\_\_

Police Department: \_\_\_\_\_

Dept. of Public Works: \_\_\_\_\_

Building Department: \_\_\_\_\_

No certification of Occupancy will be issued until this clearance sheet is signed and returned to the Building Department. It is the applicant's responsibility to process this clearance as swiftly as possible. Thank you.

This clearance order by: \_\_\_\_\_

on \_\_\_\_\_

Building Inspector

Date