How to Apply for a Permit with the Franklin County Cooperative Inspection Program



1. Go to our website <u>FCCIP.org</u> and click on, "PermitEyes Applicant Login".



2. You will be directed to the applicant login home page, where you can log in if you already have an account with our department. If you do not have an account, please click on "New User Register Here!"



3. If you do not have an account, then you will be directed to the applicant registration form. Complete all required fields and create a username and password.

@ APPLICANT REGISTRATION	FORM					
PERSONAL DETAILS	LOGIN DETAILS	OTHER DETAILS	PREVIEW			
STEP 1- PERSONAL DETAILS						
* Name						
Address * Street No.				* Street Name		
* City				* State	* Zip	
Contact * Phone				Alt. Phone		
* Email				Fax		
			EXIT NEXT			

4. You will then be prompted to go to your homepage. This is how your account homepage will appear. When you are ready to apply for a permit, click on "New Application" located in the top left corner of your screen.

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		lease read before	proceeding!	a ha di di a di a di a construcción (C										
	D WORK WI	itn a particular pe	mit application, select	it by clicking the eye icon 🥌	Inen a screen will pop up to the left allow	ing you to pay online.								
A	fter the In	spector has revie	wed your application, y	rou might see the chat bubb	le 🗩 lit, Indicating there is a message.									
т	o upload o	document, click o	n the 🔍 select the file	on your computer, and ther	n click "Submit".									
	the applie	cation indicates T	Vaiting for Signoff", the	n other departments have b	peen asked to approve via the online system									
-			- The stand butter											
Т	o make pa	ayment click on th	e "Pay Now" button.											
۷	/hen you l	log back into your	account be sure to ref	resh browser to see updated	d status of your permit application.									
co	S BLDG													
												Search:		
												Search:		
	Ap. No.	Appl. Issi Date Dat	e Site e Address	Applicant	Owner Name	Appl. Type	Permit Number.	Status				Search:		
	Ap. No.	Appl. Issi Date Dat	e Site e Address	Applicant	Owner Name	Appl. Type	Permit Number.	Status				Search:		
	Ap. No.	Appl. Date Dat	e Site Address	Applicant	Owner Name	Appl. Type Select v	Permit Number.	Status Select	~			Search:		
(4)	Ap. No.	Appl. Iss Date Dat	e Site Address	Applicant	Owner Name	Appl. Type Select v	Permit Number.	Status Select	~	RESI.	R-22-0522	Search: Permit Issued		
 (*) (*)	Ap. No. 30051 5106	Appl. Jass Date Dat 1 06/23/2 05/30/1	e Site Address	Applicant 57 Bald Mt Rd 51 Bridge St.	Owner Name Gomario, Jerel Edward Marcotti	Appl. Type Select v Gomarlo, Town Of	Permit Number.	Status Select	×	RESI. ELECT.	R-22-0522 F-13-0192	Search: Permit Issued Permit Issued		
() () () ()	Ap. No. 30051 5106 5093	Appl. Jass Date Date 1 06/23/2 05/30/1 05/29/1	e Site Address 2 06/27/22 3 06/01/13 3 05/29/13	Applicant 57 Bald Mt Rd 51 Bridge St. 103 Montague Rd	Owner Name Gomario, Jerel Edward Marcotti Michael Leary	Appl. Type Select v Gomario, Town Of Finch Fre	Permit Number.	Status Select	~	RESI. FLECT. ELECT.	R-22-0522 F-13-0192 E-13-0192	Search: Permit Issued Permit Issued Permit Issued		
 (a) (b) (c) (c)	Ap. No. 30051 5106 5093 5073	Appl. Iss: Date Dat 1 06/23/2 05/30/1 05/29/1 05/24/1	e Site Address 2 06/27/22 3 06/01/13 3 05/29/13	Applicant 57 Bald Mt Rd 51 Bridge St. 103 Montague Rd 17 Ashfield Road	Owner Name Gomarlo, Jerel Edward Marcotti Michael Leary Summer, Stuet & Donna	Appl. Type Select v Gomario, Town Of Finch Fre Summer,	Permit Number. Jerel Shelburne derick + Crafts Stuart & Donne	Status Select	~	RESI. FLECT. ELECT. RESI.	R-22.0522 F-13-0192 F-13-0191 R-13-0747	Search: Permit Issued Permit Issued Permit Issued		
	Ap. No. 30051 5106 5093 5073 392	Appl. Date Dat 06/22/2 05/30/1 05/24/1 05/24/1	e Site Address 06/27/22 06/27/22 06/01/13 05/29/13 09/20/13 09/20/13	Applicant 57 Bald Mt Rd 51 Bridge St. 103 Montague Rd 17 Ashfield Road 9 Moore St	Owner Name Gomarlo, Jerel Edward Marcotti Michael Leary Summer, Stuart & Donna Jeff Gale	Appl. Type Select v Gomario, Town Of Finch Fre Summer, Suddy Av	Permit Number. Jerel Shelburne derick + Crafts Stuart & Donna	Status Select	~	RESI, FLECT. ELECT. RESI, RESI,	R-22-0522 F-13-0192 E-13-0191 R-13-0747 R-11-0115	Search: Permit Issued Permit Issued Permit Issued Permit Issued		
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5. On the next screen, select the permit type you wish to apply for. In this example, I will be applying for a Residential Building Permit.

HOME NEW APPLICATION		Welcome To	FRCOG Online Permitting	g System		Christina Brothers ~
			Select Permit to Begin			
Certificate of Inspection Residential Building Permit	Commercial Building Permit Sheet Metal Permit	Commercial Fire Protection System Sign Permit	Electrical Permit Solid Fuel Burning Appliance	Gas Permit Tent Permit	Plumbing Permit	

This is the residential building permit. Most of our forms follow a similar structure when selecting the address where the work will be performed.

First, choose the town where the work will be done. Next, the owner's information should automatically populate. If the owner's name is incorrect, you can edit the owner's details. If you are applying for a permit and the property does not yet have an assigned address, select the option "No street address/owner," where you can manually enter the information about the owner and the property.

Please complete all the required fields on the permit. If you are uncertain whether any information is required from you, please contact our office. Alternatively, we may send you a chat through the portal on your account asking for additional information.

E NEW A	APPLICATION				Welcor	ne To FF	RCOG Onli	ine Permi	ting Systen	n				Ch	ristina Brothe
	PPLICATION TO CONSTRU	ICT, REPAIR, REN	IOVATE OR DE	MOLISH A ON	IE OR TWO I	FAMILY DV	VELLING								
							SAVE AND	EXIT							
Town	vn ENTION: Please be aware that the :	site address is not al	ways the mailing ac	ddress. If the addr	ess you are lool	king for is in S	ihelburne Falls, p	please look und	er Buckland and/or	r Shelburne.					
O A Please	Ashfield O Bernardston ise select town first	O Buckland	O Charlemont	O Conway	O Erving	O Gill	O Hawley	O Heath	O Leverett	O Leyden	O Rowe	O Shelburne	O Shutesbur	ry O Whately	
SECTI	TION 1 - SITE INFORMATION												NO STREET ADI	DRESS / OWNER	
SECTI * Stre	TION 1 - SITE INFORMATION	_	-	-	-		v		* Map Block Lot				NO STREET ADI	DRESS / OWNER	
SECTI * Stre * Stre	TION 1 - SITE INFORMATION reet Name reet Number				-		~		* Map Block Lot Zone				NO STREET ADI	DRESS / OWNER	
SECTI * Stre * Stre Town/	TION 1 - SITE INFORMATION reet Name reet Number n/City				St	ate	~		* Map Block Lot Zone			Zip	NO STREET ADI	DRESS / OWNER	
SECTI * Stre * Stre Town/ Unit N	TION 1 - SITE INFORMATION reet Name reet Number in/City t Number				St	ate	y y		* Map Block Lot Zone Flood Zone			Zip	NO STREET AD	DRESS / OWNER	
SECTI * Stre Town/ Unit N	TION 1 - SITE INFORMATION reet Name reet Number n/City t Number			1	St	ate	v	-	* Map Block Lot Zone Flood Zone	_		Zip	NO STREET AD	DRESS / OWNER	
SECTI * Stre * Stre Town/ Unit N SECTI	TION 1 - SITE INFORMATION reet Name reet Number n/City TION 2 - OWNER INFORMATION unger Name				St	ate	v		* Map Block Lot Zone Flood Zone			Zip	NO STREET ADI	DRESS / OWNER	
SECTI * Stre * Stre Town/ Unit N SECTI * Owr	TION 1 - SITE INFORMATION reet Name reet Number n/City t Number TION 2 - OWNER INFORMATION wher Name reet Number				St	ate	-		* Map Block Lot Zone Flood Zone			Zip	NO STREET ADI	DRESS / OWNER	
SECTI * Stre + Stre Town/ Unit N SECTI * Own + Stre * S	TION 1 - SITE INFORMATION reet Name reet Number In/City t Number TION 2 - OWNER INFORMATION wner Name reet Number				12	ate Street Name	v v		* Map Block Lot Zone Flood Zone			Zip	NO STREET ADI	DRESS / OWNER	
SECTI + Stre + Stre Town/ Unit N SECTI + Owr + Stre + Town + Stre + Town + Stre + Town/ + Stre + Str	TION 1 - SITE INFORMATION reet Name reet Number titNot t Number TION 2- OWNER INFORMATION wher Name reet Number wwn/City				12	ate Street Name State	v v		* Map Block Lot Zone Flood Zone			Zip * Zip	NO STREET ADI	DRESS / OWNER	

6. After providing the applicant and owner information, please specify the type of work you will be doing under Section 5.

			Welcome To F	RCOG Online Permitting	System		Christina Bro
		isons.	Jun	998 S		- up	u 1201
*T	Telephone	4133374087	* Email	chris@frcog.org			
SE	CTION 4 - MAILING ADDRESS	5	Same As Site Int	formation v			
Stre	reet Number	66	Street Name	ASHFIELD RD			
Tov	wn/City	Buckland	State	MA		Zip	
P	New 1 or 2 Family Dwellin	g ON New Comm	samp overlag anotation by be preceden you and rectal / 3 or more Family Dwelling should only be a Building should be selected for additions, renovat commercial / 3 or more Family Dwelling on Structure	exploying for a permit for a new Y or 2 ran selected if you are applying for a permit for ions, solar panels, etc., and accessory stru Existing Build	ing or a new 3 or more Family dwelling, ictures such as sheds and garages." Jing/Accessory Structure (Shed, Garage, etc.)		Reaf
C × E Rep) New 1 or 2 Family Dwellin Addition Siding Shed Explanation of work: (Be spec place siding	g New Comm An Existing g New C Garage Gifte, For example: "Install new bath and ki	arctal / 3 or more Family Dwelling should only be a Sudding should be selected for additions, renovat ommercial / 3 or more Family Dwelling ory Structure anels tchen," not "Interior Renovations") (186 character	apping the apprint for a permit for a serve to 2-rate bions, solar panels, etc., and accessory stru- bions, solar panels, etc., and accessory stru- structure, solar panels, etc., and accessory stru- structure, solar panels, etc., and accessory struc- structure, solar panels, etc., and accessory structure, solar panels, etc., and access	ing using a new 3 or more Family dwelling. ctures such as sheds and garages." ding/Accessory Structure (Shed, Garage, etc.) interior Renovation Windows Other		Roof
← E) New 1 or 2 Family Dwellin Addition Shdn Explanation of work: (Be spec	g New Comm An Existing g Access Solar F Garag zific. For example: "Install new bath and ki	arrelal 7 3 or more Family Owelling should only be a Building should be selected for additions, renovat ommercial 7 3 or more Family Dwelling ory Structure anels tchen: "not "Interior Renovations") (186 character Con	appying to a permit of a permit of constraints of a constraint of a permit of constraints of a constraint of the constraints o	a new 3 or more Family dwelling. ctures such as sheds and garages. ding/Accessory Structure (Shed, Garage, etc.) interior Renovation Windows Other Davit		Roof
*E Rep	New 1 or 2 Family Dwellin Addition Sing Shed Explanation of work: (Be spec place siding	g Hew Comm An Existing g Access Golar F Garage Grife. For example: "Install new bath and ki	arctal / 3 or more Family Dwelling should only be reliable for additions, removat building should be selected for additions, removat ony Structure anels [] tachen," not "Interior Renovations") (186 charactions) (186 charactions)	Papping for a permit for test of the second seco	a new 3 or more Family dwelling. ctures such as sheds and garages." ling/Accessory Structure (Shed, Garage, etc.) interior Renovation Windows Other davit	_	Roof
*E Rep) New 1 or 2 Family Dwellin Addition Sing Shed Explanation of work: (Be spec	g New Comm An Existing g Access Solar F Garage cific. For example: "Install new bath and ki	and a second sec	elaphing for a permit for elaphing for a permit for tons, solar panels, etc., and accessory stru- elaphing for a permit for tons, solar panels, etc., and accessory stru- elaphing for a permit for tons, solar panels, etc., and accessory stru- elaphing for any solar structure selective Demolstion ers remaining) struction Debris Affice (For all renovation work) Is that the debris resulting from this v	vork shall be disposed of in a properly licensee	d disposal facility as defi	Roof
Per	New 1 or 2 Family Dwellin Addition Sing Shed Explanation of work: (Be spec place siding In accordance with the pro	g Her Comm An Existing g Grant Existing Grant Existing Comments Grant Existing Comments Gr	arctal / 3 or more Family Dwilling should only be relicted for additions, removed on more call / 3 or more Family Dwelling ory Structure anels []] tchen." not "Interior Renovations") (186 character chen." con statement chen." chen." con statement chen. con state	elephyne (total permit for a large that a large to a large total and total accessory structure and accessory structure access	vork shall be disposed of in a properly licensed	d disposal facility as defi	Roof

When you are adding to the footprint of your home, or you are adding an accessory structure on your property, you will need to give us setback information under section 5.3.

		Welcome To FRCOG	Online Permitting System		Christina Brothers 🗸
Sewage Disposal System	O Municipal	O n Site Disposal System			
Zone		LUC	931		
Sq.Ft. Living Space (New)		Sq. Ft. Other Space (New)			
* Demolition Debris Disposal Location		No Demolition Debris			
Use Group	Select		✓ Const. type	Select Type	~
	Required			Actual	
Acreage	80.000		Acreage	32.50	
Acreage Frontage	80,000 200		Acreage Frontage	32.50 200	
Acreage Frontage Front Yard Setback	80.000 200 20		Acreage Frontage Front Yard Setback	32.50 200 30	
Acreage Frontage Front Yard Setback Side Yard Setback	80.000 200 20 15		Acreage Frontage Front Yard Setback Side Yard Setback	32.50 200 30 100	
Acreage Frontage Front Yard Setback Side Yard Setback Rear Yard Setback	80.000 200 20 15 30		Acreage Frontage Front Yard Setback Side Yard Setback Rear Yard Setback	32,50 200 30 100 100	
Acreage Frontage Front Yard Setback Side Yard Setback Rear Yard Setback	80.000 200 15 30		Acreage Frontage Front Yard Setback Side Yard Setback Rear Yard Setback	32.50 200 20 100 100	
Acreage Frontage Front Yard Setback Side Yard Setback Rear Yard Setback	80.000 200 15 30		Acreage Frontage Front Yard Setback Side Yard Setback Rear Yard Setback	32.50 200 30 100 100	
Acreage Frontage Front Yard Setback Side Yard Setback Rear Yard Setback SECTION 6 - SEPTIC SYSTEM LOCATIO I have located and flagged the compoi	80.000 200 15 30 ents of the septic system and attest that these will	I not be compromised during construction .	Acreage Frontage Front Yard Setback Side Yard Setback Rear Yard Setback	32.50 200 30 100 100	

7. Under Section 7 please provide your Contractor's State License (CSL) and/or Home Improvement Contractor (HIC) license information if you are a contractor.

If you are the homeowner residing at this address, you can obtain a residential building permit as a homeowner. If you are unsure about the permits that require a license, please contact our office for clarification.

НОМЕ	NEW APPLICATION Welcome To FF	RCOG Online Permitting System	a Brothers 🗸
	SECTION 6 - SEPTIC SYSTEM LOCATION I have located and flagged the components of the septic system and attest that these will not be compromised during consts I do hereby certify under the pains and penalties of perjury that the information provided above is true and correct.	truction .	
	2.2 Home Improvement Contractor:		
	Is the Licensed Construction Supervisor different from the applicant or the Home Improvement Contractor?		
<	7.3 Homeowners Permit: Applicable		
	SECTION 8 - ESTIMATED COST * Estimated Cost \$ 20000		
	SECTION 9 - PROPERTY OWNER AUTHORIZATION I am the Owner O Contractor / Agent I, BUCKLAND TOWN OF as owner of the subject property hereby authorize Christina Brothers	to act on my behalf, in all matters relative to work authorized by this building permit application.	
	* Property Owner's Email	OR Copy of Signed Contract to be attached after submitting application	

8. Please complete Section 8 by providing the estimated cost of your project. Additionally, fill out Section 9. If you have a signed contract with the homeowner, please attach it to the permit after you submit it.

НОМЕ	NEW APPLICATION	Welcome To FRC	OG Online Permitting System	Christina Brothers 🐱
	SECTION 8 - ESTIMATED COST			
	* Estimated Cost	\$ 20000		
	SECTION 9 - PROPERTY OWNER AL			
	owner	O contractor / gent		
	I, BUCKLAND TOWN OF	as owner of the subject property hereby authorize Christina Brothers	to act on my behalf, in all matters relative to work authorized by this building permit application.	
	Property Owner's Email	test@test.com	OR Copy of Signed Contract to be attached after submitting application	
	Telephone No.	23-456-7890		

9. The Workers' Compensation Affidavit must be completed by all applicants. Please review all the options and select the scenario that applies to you best.

WORKERS! COMPENSATION INSURANCE AFFIDAVIT (MG1 / 152 8 25//6W			_
	Workers' Compensat	ion Insurance Affidavit: Builders/Contractors/Electric	ians/Plumbers	
		O BE FILED WITH THE PERMITTING AUTHORITI.		
Applicant Information:	Test			
Name (Business / Organization / Intimutal)				
Street Number 12	Stree	t Name Olive Street		
City Greenfield	State	ма	Zip 01301	
Telephone 123-456-7890				
Are you an employer? Check the appropriate bo	ox. * d/or part-time).*			
Are you an employer? Check the appropriate bo I am an employer with employees (full and I am a sole proprietor or partnership and f	ox. * d/or part-time).* have no employees working for me in any capacity. [No worker	s' comp. Insurance required.)		
Are you an employer? Check the appropriate bo I am an employer with employees (full and I am a sole proprietor or partnership and f I am a homeowner doing all work myself. [ox. * d/or part-time).* have no employees working for me in any capacity. [No worker [No workers' comp. insurance required.]+	s' comp. Insurance required.]		
Are you an employer? Check the appropriate bo I am an employer with employees (full and I am a sole proprietor or partnership and f I am a homeowner doing all work myself. I am a homeowner and will be hiring contr	ox. * d/or part-time).* have no employees working for me in any capacity. [No worker [No workers' comp. insurance required.]+ ractors to conduct all work on my property. I will ensure that all	s' comp. Insurance required.] I contractors either have workers' compensation insurance or	are sole proprietors with no employees.	
Are you an employer? Check the appropriate bo I am an employer with employees (full and I am a sole proprietor or partnership and f I am a homeowner doing all work myself. I am a homeowner and will be hiring contr I am a general contractor and I have hired	ox. * dior part-time).* have no employees working for me in any capacity. [No worker [No workers' comp. insurance required.]+ ractors to conduct all work on my property. I will ensure that all I the sub-contractors listed on the attached sheet. These sub-co	s' comp. Insurance required.] I contractors either have workers' compensation insurance or intractors have employees and have workers' comp. insurance	are sole proprietors with no employees.	
Are you an employer? Check the appropriate bo I am an employer with employees (full and I am a sole proprietor or partnership and f I am a homeowner doing all work myself. I am a homeowner and will be hiring contr I am a general contractor and I have hired We are a corporation and its officers have	or. * d/or part-time).* have no employees working for me in any capacity. [No worker [No workers' comp. insurance required.]+ ractors to conduct all work on my property. I will ensure that all the sub-contractors listed on the attached sheet. These sub-co exercised their right of exemption per MGL c. 152, \$ 1(4) and w	s' comp. Insurance required.] I contractors either have workers' compensation insurance or intractors have employees and have workers' comp. insurance have no employees. [No workers' comp. insurance required	are sole proprietors with no employees. e.++	
Are you an employer? Check the appropriate bo I am an employer with employees (full and I am a sole proprietor or partnership and H I am a homeowner doing all work myself. [I am a homeowner and will be hiring contr I am a general contractor and I have hired We are a corporation and its officers have Type of Project. #	ox. * d/or part-time).* have no employees working for me in any capacity. [No worker [No workers' comp. insurance required.]+ ractors to conduct all work on my property. I will ensure that all the sub-contractors listed on the attached sheet. These sub-co exercised their right of exemption per MGL c. 152, 5 1(4) and w	s' comp. Insurance required.] I contractors either have workers' compensation insurance or intractors have employees and have workers' comp. insurance re have no employees. [No workers' comp. insurance required	are sole proprietors with no employees. + Lj	

10. Please select the type of project that applies to your application.

HOME		Welcome To FRCOG	Online Permitting System	Christina Brothers ~
	Are you an employer? Check the appropriate box. • I am an employer with employees (full and/or part I am a sole proprietor or partnership and have no I am a boneowner doing all work myself. [No work I am a homeowner and will be hiring contractors to	-time).* employees working for me in any capacity. [No workers' comp. insurance exes' comp. insurance required.]+ o conduct all work on my property. I will ensure that all contractors either	required.] r have workers' compensation insurance or are sole pro	prietors with no employees.
	I am a general contractor and I have hired the sub- We are a corporation and its officers have exercise	-contractors listed on the attached sheet. These sub-contractors have em d their right of exemption per MGL c. 152, § 1(4) and we have no employ	ployees and have workers' comp. insurance.++ ees. [No workers' comp. insurance required.]	
	Type of Project *	Remodeling	Demolition	Building Addition
	Electrical Repairs or Additions	Plumbing Repairs or Additions Siding	Gas repairs or additions	Roof Repairs
	*Any applicant that checks box ≠1 must also fill our the see +Homeowners who submit this affidavit indicating they are ++Contractors that check this box must attached an additio	ction below showing their worker's compensation policy information. e doing all work and then hire outside contractors must submit a new affi onal sheet showing the name of the sub-contractors and state whether o	idavit indicating such. r not those entities have employees. If the sub-contract	ors have employees, they must provide their worker's comp. policy number.
	I am an employer that is providing workers' compensation insurance Company Name	ion insurance for my employees. Below is the policy and job site informat	tion.	
	Policy # or Self-ins. Lic. #		Expiration Date	
annaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaa	Job Site Address Street Number	Street Name		

11. Complete the rest of the affidavit.

	PPLICATION		Welcome	To FRCOG Online	Permitting System			Christina Brothers
Jo	ob Site Address							
5	Street Number		Stree	t Name				
G	lity		State			Zip		
Fi co	allure to secure coverage as requi copy of this statement may be forw	red under Section MGL c. 152, 25A is c arded to the Office of Investigations of	riminal violation punishable by a fine f the DIA for insurance coverage verif	up to \$1,500.00 and/or one ication.	year imprisonment, as well as civil p	enalties in form of a STOP W	ORK ORDER and a fi	ine of up to \$250.00 a day against the violator. A
L	Christina Brothers	. do hereby certify under th	he pains and penalties of perjury that	the information provided a	bove is true and correct.			
т	elephone 413337408	7					Date	04/23/25
	* I have read the instructions	and agreed.						
DECLA	* I have read the instructions ARATION	and agreed.						
DECLA	I have read the instructions ARATION KLAND TOWN OF	and agreed.	ents and information on the foregoing	g application are true and a	curate, to the best of my knowledge	and belief .		
DECLA I, BUCK	* I have read the instructions ARATION KLAND TOWN OF I do hereby certify under the pair	and agreed.	ents and information on the foregoing	g application are true and ar rrect.	curate, to the best of my knowledge	and belief .	Date	04/23/2025
DECLA I, BUCK	* I have read the instructions ARATION KLAND TOWN OF I do hereby certify under the pair tes Mandatory Field.	and agreed. hereby declare that the statem is & penalties of perjury that the inform	ents and information on the foregoin mation provided above is true and co	g application are true and a rrect.	curate, to the best of my knowledge	and belief .	Date	04/23/2025

12. Once you have completed all the required fields, you will have three options: **1. Submit** will automatically send your application to our office for review. **2. Save and Exit** allows you to save your application to return to later. Our office will not be able to see this saved application. **3. Exit** will delete all the progress you have made.

If you are missing any information, the screen will automatically scroll to the required fields that need your attention.

DECLARATION			
I, BUCKLAND TOWN OF	hereby declare that the statements and information on the foregoing application are true and accurate, to the best of my knowledge and belief.		
I do hereby certify under the	pains & penalties of perjury that the information provided above is true and correct.	Date	04/23/2025
* Indicates Mandatory Field.			
	SUBMIT SAVE AND EXIT		

13. After you press "submit," you will be directed to this screen. Click "Go to the homepage."

frcog	Franklin County Cooperative Inspection Program 12 Olive Street, Suite 2 Greenfletd, MA, 0130-3318 (413) 774-3167 Fax(413) 774-3169 Website: www.fcOp.org Ashfield Bernardston Buckland Charlemont Conway Erving Gill Hawley Heath Leverett Leyden Rowe Shelburne Shutesbury Whately
New Prelimi	nary Application Received
Your Preliminary Ap	Thank You !! Ilcation is Successfully Submitted.
You will shortly be taken to your personal home page. This page will always On your home page, you can do the following things 1. Upload or view any attachments. 2. Follow the approval process for your permit online. 3. Click the eye icon ⊕ to open the transaction panel where you can pay fees, attach documents, and complete c	be yours, and will include information on any building permits that you submit over time. ther steps in the application process. Pay online for your permit with a credit card, Debit card or by entering your checking account information.
Once it is approved, you may print your permit and any of the attachments.	
We do attempt to review	permit applications as soon as possible.
Thank y	ou for your patience.
Building Department	
G Click on the above button to	o TO HOMEPAGE get to home page as you need to log out.

14. After you click on "Go to Homepage", look for the "eye" icon next to the application you just completed and click on it. This will open a dashboard on the right side of the screen where you can view your permit application, pay the fee, initiate a chat with us, check the sign-off results, and more.

HOME	NEW APPLIC	TION			Welcome To	o FRCOG O	nline Pern	itting System
Instruction To we After To up If the To ma When FRCOG B	ns - Please rea ork with a part the inspector bload documer application in ake payment of n you log back	d before proc cular permit a has reviewed y it, click on the dicates "Waitin lick on the "Pa into your acco	eeding! application, select it i your application, you select the file or ng for Signoff", then ny Now" button. unt be sure to refre	by clicking the eye icon (2). Then a si u might see the chat bubble (2) lit, in n your computer, and then click "Sub other departments have been asked sh browser to see updated status of	creen will pop up to the left allowing idicating there is a message. mit ^a . to approve via the online system. your permit application.	; you to pay online		TRANSACTIONS MONITOR Application No. Application No. Application No. Application Type Besidential Building Application Site Address Christina Brothers od A3HFIELD RD Site Address Christina Brothers od A3HFIELD RD Site Address Christina Brothers od A3HFIELD RD Christina Brothers od A3HFIELD RD Application Type Od Address Christina Brothers od A3HFIELD RD Application Type Od Address Christina Brothers od A3HFIELD RD Application Type Od Address Christina Brothers od A3HFIELD RD Application Type Od Address Christina Brothers od A3HFIELD RD Application Type Od Address Christina Brothers od A3HFIELD RD Application Type Od Address Christina Brothers od A3HFIELD RD Application Type Od Address Christina Brothers Od A3HFIELD RD Application Type Od Address Christina Brothers Od A3HFIELD RD Application Type Od Address Christina Brothers Od A3HFIELD RD Application Type Od Address Christina Brothers Od A3HFIELD RD Application Type Od Address Christina Brothers Od A3HFIELD RD Application Type Od Address Christina Brothers Od A3HFIELD RD Application Type Od Address Christina Brothers Od A3HFIELD RD Application Type Od Address Christina Brothers Od Address
AD	Appl	Issue	Site		Sear	rch:	Permi	Q. Plan Review
No	Date	Date	Address	Applicant	Owner Name	Appl. Type	Numb	No plan reviews done yet! \$ Pay Fee
 334 300 510 509 	09 04/23/2 051 06/23/2 06 05/30/1 03 05/29/1	5 06/27/22 3 06/01/13 3 05/29/13	66 Ashfield Rd 57 Bald Mt Rd 51 Bridge St. 103 Montague Rd	Christina Brothers Gomarlo, Jerel Edward Marcotti Michael Leary	Buckland Town Of Gomarlo, Jerel Town Of Shelburne Finch Frederick + Crafts Calla	RESI. RESI. ELECT. ELECT.	R-22-05 E-13-01 E-13-01	Issue Permit Permit not issued yet!
 507 392 383 	05/24/1 08/17/1 08/16/1	3 09/20/13 1 08/17/11 1 08/30/11	17 Ashfield Road 9 Moore St 51 Bridge St.	Sumner, Stuart & Donna Jeff Gale Town Of Shelburne (Memorial Hall)	Sumner, Stuart & Donna Suddy Avis Town Of Shelburne (Memorial Hall)	RESI. RESI.) COMM.	R-13-07 R-11-01 C-11-01	O Schedule Inspection No inspection scheduled yet!
Showing 1	to 7 of 7 ent	ries				<	1 >	Q Inspection No inspections done yet!
								Occupancy Certificate Certificate not issued yet!
								COA not issued yet!

15. Once we receive your permit application, we will send a sign-off email to the officials in your town to review the permit, if applicable. We will also assign a fee at that time. If we require additional information, we will reach out to you via chat. If you need to edit your application, you can do so by clicking the pencil icon.

НОМЕ	HOME NEW APPLICATION Welcome To FRCOG Online Permitting System							thers v			
Instructions - Please read before proceeding: To work with a particular permit application, select it by clicking the eye (on (*)). Then a screen will pop up to the left allowing you to pay online. After the inspector has reviewed your application, you might see the chat bubble (*) it, indicating there is a message. To upload document, click on the (*) select the file on your computer, and then click "Submit". If the application indicates "Walting for Signoff", then other departments have been asked to approve via the online system. To make payment click on the *Pay Now" button. When you log back into your account be sure to refresh browser to see updated status of your permit application. TRCOG BLDG						TRANSACTIONS MONITOR Application No. Application Type Residential Building Application Site Address Christina Brothers 66 ASHRELD RD Christina Brothers 66 ASHRELD RD Christina Brothers ChristinaB	×				
						Sear	rch:			History	
	Ap. No.	Appl. Date	Issue Date	Site Address	Applicant	Owner Name	Appl. Type	~	Permi Numb	No. SignOff Date Comment Result No records.	
	38409 30051 5106 5093 5073 392 383	04/23/25 06/23/22 05/30/13 05/29/13 05/24/13 08/17/11 08/16/11	06/27/22 06/01/13 05/29/13 09/20/13 08/17/11 08/30/11	66 Ashfield Rd 57 Bald Mt Rd 51 Bridge St. 103 Montague Ro 17 Ashfield Road 9 Moore St 51 Bridge St.	Christina Brothers Gomarlo, Jerel Edward Marcotti Michael Leary Sumner, Stuart & Donna Jeff Gale Town Of Shelburne (Memorial Hall)	Buckland Town Of Gomarlo, Jerel Town Of Shalburne Finch Frederick + Crafts Calla Sumner, Stuart & Donna Suddy Avis Town Of Shelburne (Memorial Hall)	RESI. RESI. ELECT. ELECT. RESI. RESI. COMM.	R E R R C	R-22-05 E-13-01 E-13-01 R-13-07 R-11-01 E-11-01 S	Q. Zoning No zonings done yet! Q. Plan Review No plan reviews done yet! \$ Pay Fee Amount Parable: \$188.00 Fee Paid: 50.00 rev now	~
Showir	ng 1 to 7	of / entrie	s				<	1	>	Issue Permit Permit not issued yet! O. Schedule Inspection	

16. When the permit fee is ready for payment, you can click "Pay Now".

Q Plan Review	
No plan reviews done yet!	
\$ Pay Fee	
Amount Payable: \$188.00 Fee Paid: \$0.00 PAY NOW	~
Issue Permit	
Permit not issued yet!	
O Schedule Inspection	
No inspection scheduled yet!	
Q Inspection	
No inspections done vet	^

Another screen will confirm your payment choice, after which you will be directed to UniPay.

Onli	Online Payment Transaction Interface						
Application Id: 38409 Location: 66 ASHFIELD RD			Customer Name: Ch Permit: Re:			ristina Brothers sidential Building Permit	
No.	Amount		Act	ion		Pay Fee	
1	\$188.00			/IEW		\checkmark	
Amc	ount: \$1	88.00					
						SUBMIT CLOS	Ε

17. After you hit "Submit" this will be the next screen. Please follow the prompts of Unipay. Alternatively, you can mail a check to our office. Please make checks payable to "FRCOG".

UNIPAY		Need Assistance? Call: 1-877-227-1157 Email: support@unipayteam.com			
Cart					
Description	Price	Qty	Total		
FRCOG - Permits	\$188.00	1	\$188.00		
			Total: \$188.00		
Accepted payment types				Checkout	
📄 🚟 VISA VISA 🌉 🎫	PayPal/Venmo				
Check Credit Debit Credit Debit Credi	t Debit PayPal/Venmo				
\$0.50 \$5.00 \$5.00 \$3.95 \$5.00 \$5.00 \$5.00	\$5.00 \$5.00				

Applicant Transaction Monitor Key:

TRANSACTIO	NS MONITOR	×
Application No. Application Type	38409 Applicant Name TEST Residential Building Site Address 66 ASHFIELD RD	1
Ø	Paperclip: Add attachments	
>	Chat bubble: Message the FCCIP office	
٢	Eye: View permit application	
San P	Pencil: Edit permit application	
0	Clock: Request inspection	oct
4	guarantees an inspection with our inspectors. To confirm that we have received your request or to schedule ar inspection as soon as possible, call the Building Department at 413-774-3167.	1

Chat color indicators						
	Grey: No chat					
	Green: Applicant sent a chat					
	Red: Office staff or town official has sent applicant a message					