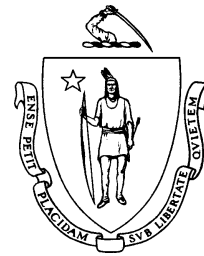


Commonwealth of Massachusetts  
**Division of Occupational Licensure**  
**Office of Public Safety and Inspections**  
**Board of Building Regulations and Standards**

1000 Washington Street, Suite 710  
Boston, MA 02118



**Building Official Certification Committee's**  
**Retirement Notice Form**

**This form should only be submitted by Building Officials who are retiring and will not continue service as a building official in the future.**

*110.R7.2.4 Retired Persons. Any person who has been duly certified in accordance with 780 CMR 110.R7 and who retires from service in good standing, may petition the committee to receive "retired status" certification. Upon approval, said certification shall be denoted "retired" and shall not be deemed revoked. Revocation shall only be invoked for cause. **Any person who has been approved for retired status certification and who wishes to reactivate said certification shall comply with the examination schedule as defined in 780 CMR 110.R7 for the level of certification sought.***

**Mail Application to:** Division of Occupational Licensure · Attn: BOCC · 1000 Washington Street – Suite 710 · Boston, MA 02118 or **e-mail:** [BOCC-MA@mass.gov](mailto:BOCC-MA@mass.gov)

**Part One:**

Name of Building Official: \_\_\_\_\_ Certification Number: \_\_\_\_\_

Address: \_\_\_\_\_  
No & Street Town State Zip

Effective Date of Retirement: \_\_\_\_\_

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**VERIFICATION BY NOTARY:**

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, the undersigned notary public, personally appeared \_\_\_\_\_ (name of document signer), and proved to me through satisfactory evidence of identification, which was/were \_\_\_\_\_, to be the person whose name is signed on the preceding or attached document, and acknowledged to me that he/she signed it voluntarily for its stated purpose.

Notary Public \_\_\_\_\_ Expiration of Commission \_\_\_\_\_