

Commonwealth of Massachusetts

Board of Building Regulations and Standards

Manufactured Buildings Program APPLICATION FOR BULK LABELS

Manufacturer Name			MC#			
Address						
City/State/Zip						
Phone						
Email:						
Application is hereby made for the following number of labels of approval			Number of Labels Requested		Total Amount Attached	
Number of Manufactured Building Labels Requested					\$	
Number of Building Component Labels Requested					\$	
Name of Person Ordering Labels						
Signature Date:				ate:		
These labels are for manufactured building units and\or components which were produced at the manufacturing plant identified above. Said labels shall be affixed by the third-party inspection agent (unless otherwise approved in writing by the BBRS). These manufactured buildings and\or components have been produced for sale, delivery and\or installation in the Commonwealth of Massachusetts.						
In making this application of the Commonwealth of Massachusetts, State Board of Building Regulations and Standards for labels, the applicant agrees to the conditions stated in all applicable Massachusetts Codes and the Rule and Regulations governing the Manufactured Buildings and Building Components Program.						
ALL LABELS WILL BE SHIPPED TO THE THIRD-PARTY INSPECTION AGENCY						
Third-Party Inspection Agen		TPIA #:				
Address:		Phone:				
Third-Party Inspector to Rec	:		Date:			
			<u> </u>			

The original form shall be mailed to: Office of Public Safety & Inspections Manufactured Buildings Program Attention: Sean Harvey

One Federal St,Suite 600 Boston, MA 02110

For State Use Only							
Fee Received	\$		Check Number:				
Number of Labels Issued		Label Numl	oers From:	To and Including:			
Issued By:			Date:				