



**Commonwealth of Massachusetts
Division of Occupational Licensure
Office of Public Safety and Inspections**

1 Federal Street, Suite 0600
Boston, Massachusetts 02110-2012

MASSACHUSETTS STATE BUILDING CODE - CODE CHANGE PROPOSAL FORM

Impacted code:	<input type="checkbox"/> Base Code <input type="checkbox"/> Residential Code	State Use Only	
Date Submitted:		Date Received:	
Code Section:		Code Change Number:	
Name of proponent:			
Company / Organization represented, if any:	Check <input type="checkbox"/> if representing self		
Address (number, street, city, state, ZIP):			
Telephone number:			
Email address:			

PLEASE CHECK ✓ THE TYPE OF AMENDMENT PROPOSED

Change existing section language **Add new section** **Delete existing section and substitute**
 Delete existing section, no substitute **Other, Explain:**

PLEASE TYPE THE PROPOSED AMENDMENT BELOW. If you propose to change a section, please copy the original text from either the relevant model code and/or MA amendment and indicate the code edition. Indicate, with a strike through, the text that you propose to delete. Please also indicate any new text in both italic and red font. Finally, for each proposal submitted, please provide the justification items requested below. Completed code amendment forms may be emailed to bbrs-ma@mass.gov. Please attach additional pages as necessary.

Existing Language:

Proposed Changes:



Why is the ICC base code language not adequate / sufficient?

Pros of the proposed change:

Cons of the proposed change:

Estimated impact on life safety:

Estimated impact on cost: