



Commonwealth of Massachusetts

Board of Building Regulations and Standards

Manufactured Buildings Program

THIRD PARTY INSPECTION AGENCY CERTIFICATION

BULK LABELS

This Section to be completed by Third Party Inspection Agency - Please print or type - UNITS MAY NOT BE SHIPPED UNTIL THIS CERTIFICATION IS COMPLETED and COMPONENTS ARE LABELED

SECTION 1 - MANUFACTURER INFORMATION (S\Mfg\mfgthirdpartycert bulklabels2005- July, 2018)

Manufacturer Name		MC#	
Address			
Telephone		Fax	
E Mail Address			

SECTION 2 - BUILDING INFORMATION **BBRS\DPS I.D. #**

Street Name & Number			
City		State	Zip
Use Group	Construction Type		

In signing this form below, I hereby certify that the units identified on this form have been inspected and are constructed in accordance with the following codes, as applicable.

Massachusetts State Building Code (780 CMR)	<input type="checkbox"/>	Massachusetts State Electrical Code(527 CMR 12)	<input type="checkbox"/>
Massachusetts State Plumbing and Fuel Gas Code (248 CMR)	<input type="checkbox"/>	Massachusetts Architectural Access Board Regulations (521 CMR)	<input type="checkbox"/>

Mfg. Plant Inspector's Name (Print Name)	Third Party Inspector (Print Name)
	TPIA#:
Mfg Plant Inspector's Signature	Third Party Inspector's Signature
Date:	Date:

SECTION 3 - BUILDER/DEALER/CERTIFIED INSTALLER INFORMATION

Builder/Dealer:	
Address:	
Licensed Construction Supervisor:	License Number: _____
Certified Installer:	Exp. Date: _____

SECTION 4 - LABEL INFORMATION (Indicate number of boxes and number of labels required)

Number of Units		Label Numbers Issued:
Manufacturer's Serial Number:		
Manufacturer's Model Designation:		