Commonwealth of Massachusetts

Manufactured Buildings Program

Application for Third Party Inspection Agency (TPIA)

780 CMR 110.R3 - *The Rules and Regulations for Manufactured Buildings, Building Components and Manufactured Homes* requires Third Party Inspection Agencies to be certified (as approved) in order to perform inspections and evaluations of building systems, compliance assurance programs, manufactured buildings and building components on behalf of the Commonwealth for the manufactured buildings program. This application shall be completed annually to renew said certification. Please complete this application fully. If you have any questions regarding the application process, please call 617-701-8647

Name of Third Party Inspection Agency (TPIA)		**Massachusetts Approval Number**	
Date of Application:	Amount of Fee: $500.00	Check #	
Corporate Headquarters:			
Contact Person:			
Address:			
Telephone: ( )	Fax: ( )	Email:	

Please update all information as requested below.

Name of Directors:

List all directors separately, noting qualifications.

No.	**Name of Director**	**Qualifications (Registered Architect or Engineer)** **Please indicate discipline and state(s) where registered.**	**Years of service with TPIA.**	

Name of Current Employees:

List all employees separately, noting qualifications.

No.	**Name of Employee**	**Qualifications (Registered Architect or Engineer)** **Please indicate discipline and state(s) where registered.**	**Years of service with TPIA.**	**Is this a change from last renewal?**	**Is the employee full-time or part-time?**	**Is the employee on contract or on the company's payroll?**

No.	Name of Employee	Qualifications (Registered Architect or Engineer) Please indicate discipline and state(s) where registered.	Years of service with TPIA.	Is this a change from last renewal?	Is the employee full-time or parttime?	Is the employee on contract or on the company's payroll?

Each third party inspection agency (TPIA) is required to provide an organizational chart showing management and supervisory personnel including graduate engineers and architects, names of all consulting engineers or architects and whether such employees or consultants are full or part time.

Has an organization chart been submitted by your company? If the answer to this question is no, or if your company's organizational structure has undergone changes since your last renewal, please attach a current organization chart to this application	Yes	No	Please indicate the date of the latest revision to your company's organization chart.

780 CMR 110.R3 requires that each third party inspection agency (TPIA) inspector is trained and the TPIA must attest that all inspectors, evaluators and other technicians are properly educated to perform all assigned tasks. Has your company instituted such a program of education for this purpose?	Yes	No

Each third party inspection agency (TPIA) must provide an outline of general procedures for the supervision of inspectors and evaluators including methods of checking and evaluating their work. Has your company submitted such general procedures? If no, please attach procedures to this application.	Yes	No	Please indicate the date of the latest revision to your company's general supervisory procedures.

	Building	**Plumbing**	**Mechanical**	**Electrical**	**Handicapped Access**	**Other**
Please indicate the codes to which in-plant, manufactured building product inspections are made, citing reference year and edition.						

Describe the frequency with which personnel from your agency perform in-plant inspections of the manufacturers under your care and control. List each plant separately and provide reasons for the inspection patterns. (Please make additional copies of this page if it is necessary to list all manufacturing plants under your company's care.)

Manufacturing Plant Name	**Plant Address**	**Frequency of Inspection**	**Reasons**

Fees: Certification renewal fees shall be $500.00 each year. Please make checks payable to the Commonwealth of Massachusetts.

Attestation: All information provided on this application is true and accurate to the best abilities of this agency.

Signature of General Manager: _____ Date:_____

Send completed applications along with all required attachments to:

Office of Public Safety & Inspections
Manufactured Buildings Program
Attention: Sean Harvey
One Federal St, Suite 600
Boston, MA 02110

OR

MFG-Buildings@mass.gov