



# City of Medford

BOARD OF HEALTH

City Hall - Room 311

85 George P Hassett Drive

Medford, Massachusetts

02155

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Director

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## Application for Certificate of Fitness

IN ACCORDANCE WITH STATE SANITARY CODE, CHAPTER 11, 105 CMR 410.000  
"MINIMUM STANDARDS OF FITNESS FOR HUMAN HABITATION."

FEE: \$75.00

PROPERTY LOCATED AT \_\_\_\_\_ UNIT# \_\_\_\_\_

IS THIS UNIT DESIGNATED AS RIGHT LEFT FRONT OR BACK, PLEASE CIRCLE ONE

OWNER/LESSOR \_\_\_\_\_ MANAGER/ AGENT \_\_\_\_\_

NO P.O. BOX ADDRESS \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_ CITY, STATE, ZIP \_\_\_\_\_

RESIDENCE PHONE \_\_\_\_\_ BUSINESS PHONE (24HRS) \_\_\_\_\_

BUSINESS PHONE \_\_\_\_\_

UNITS IN BUILDING \_\_\_\_\_

TOTAL NUMBER OF ROOMS IN DWELLING \_\_\_\_\_

APPLICANTS SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

### Inspectors use only

Date on initial inspection: \_\_\_\_\_ Date of re-inspection \_\_\_\_\_

Date of issuance of certificate \_\_\_\_\_ Date fee paid \_\_\_\_\_

Type of unit: Dwelling \_\_\_\_\_ Other \_\_\_\_\_ Check # \_\_\_\_\_ Check date \_\_\_\_\_

Notes \_\_\_\_\_

Code Enforcement Inspector \_\_\_\_\_