



# TOWN OF ANDOVER

Building Division  
36 Bartlet St.  
Andover, MA 01810  
978-623-8620  
[www.andoverma.gov](http://www.andoverma.gov)

## CHANGE OF LICENSEE FORM

**(\$100 FEE FOR LICENSE TRANSFER)**

This form is to be completed when the original Construction Supervisor Licensee (CSL) leaves or absents himself from work.

**(Please note that if the permit has been originally issued to a CSL, a homeowner is ineligible to assume responsibility for the permit.)**

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To Commissioner, Inspectional Services Dept.:

You are hereby notified that on and after \_\_\_\_\_ (date)

I, \_\_\_\_\_ (name of new licensee), will be in charge and control

of work at \_\_\_\_\_ (project address)

Authorized under \_\_\_\_\_ (building permit #)

I acknowledge that I have permission, approval and authorization to utilize all construction documents, plans, drawings, reports, narratives, affidavits and all other approved documentation submitted with the issued building permit. Attached to this document please find copies of my Construction Supervisors License, workers compensation insurance and (if applicable) Home Improvement Contractors Registration (HIC).

Signed under pains and penalties of perjury:

CSL Signature: \_\_\_\_\_

Property Owner Signature: \_\_\_\_\_

Address: \_\_\_\_\_

CSL #: \_\_\_\_\_ License Expiration Date: \_\_\_\_\_

HIC #: \_\_\_\_\_ License Expiration Date: \_\_\_\_\_

**NO WORK IS TO BE PERFORMED UNLESS A LICENSED CONSTRUCTION SUPERVISOR IS ACTIVELY IN CHARGE.**