



**City of Quincy  
Inspectional Services Department**

Thomas P. Koch  
Mayor

Jay Duca  
Director

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55 Sea Street • Quincy, Massachusetts 02169 • Telephone: (617) 376-1450 • Fax: (617) 376-1465

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FINAL AFFIDAVIT

I certify that I have observed the work associated with permit no. \_\_\_\_\_

Dated \_\_\_\_\_ for \_\_\_\_\_. To the best

Of my knowledge, information and belief, the work has been done in conformance with the approved plans and the provisions of the Massachusetts State Building Code and all other pertinent laws, rules and regulations of the City of Quincy.

\_\_\_\_\_  
Architect or Engineer Mass. Reg. No.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
Date

I certify that I have observed the work associated with permit no. \_\_\_\_\_

Dated \_\_\_\_\_ for \_\_\_\_\_. To the best of my knowledge, information and belief, the work has been done in conformance with the approved plans and the provisions of the Massachusetts State Building Code and all other pertinent laws, rules and regulation of the City of Quincy.

\_\_\_\_\_  
General Contractor – Lic. No.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
Date

Then personally appeared the above named \_\_\_\_\_  
And made oath that the above statements by them are true.

Before me,

Date

\_\_\_\_\_  
My commission expires