



CITY OF FRAMINGHAM
Public Health Department



Public Health
Prevent. Promote. Protect.

(508) 532-5470
health@framinghamma.gov
www.framinghamma.gov

MEMORIAL BUILDING
150 Concord Street, Room 205
Framingham, MA 01702

Rental Unit Certification Application

According to the Framingham Board of Health Rental Unit Certification Regulation, the owner, lessor, or person in control or in charge of a rental unit shall submit a completed application for each unit requiring an inspection. No owner, lessor or person in control or in charge of a rental unit shall commence any new tenancy or occupancy in an existing rental unit without having obtained a Rental Unit Inspection Certificate from the Framingham Board of Health. Complete the application below. Please print legibly. An incomplete application and missing fee may delay scheduling the inspection.

1. Location of Dwelling Unit Information

Date:
Address: Framingham, MA 0170 Unit # / Floor #:

2. Property Owner / Company / Trust Information

Name: Title:
Address:
Phone Number: Email:
Mailing Address (if different from above):

P.O. Boxes are NOT accepted

3. Unit Status

Is the unit currently occupied or vacant?
Occupied - Permission from the occupant is required for the Public Health Inspector to enter the unit.
Vacant - What is the estimated move-in date for the new occupant?

Statement: I certify under the penalties of perjury
Print Name

that I, to the best of my knowledge and belief, the information contained in this application is true and accurate. I understand that I must comply with the Framingham Board of Health Rental Unit Certification Regulations, the State Sanitary Code, Chapter II, Minimum Standards of Fitness for Human Habitation, 105 CMR 410.000 and all other applicable federal, state or local regulation, ordinance, and by-law. I also understand the issuance of this Certificate in no way releases the applicant from the obligation to obtain any other permits or licenses required by local, state or federal regulatory authority. Regulations can be found at:

https://www.framinghamma.gov/DocumentCenter/View/38719/Rental-Unit-Certification-Regulation-102114

https://www.mass.gov/regulations/105-CMR-41000-minimum-standards-of-fitness-for-human-habitation-state-sanitary-code-chapter-ii

Submit a completed "Rental Unit Certification Application" and a fee of \$75.00 per unit. Make check payable to the "City of Framingham." When the dwelling does not pass the initial inspection, a re-inspect is required with a \$25.00 fee. All fees are nonrefundable.

Signature:

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**For Official Use Only**

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Date of Inspection: \_\_\_\_\_ Time: \_\_\_\_\_  am  pm Inspector: \_\_\_\_\_

Passed Inspection:  Yes  No – A re-inspection is required.

Date of Re-Inspection: \_\_\_\_\_ Time: \_\_\_\_\_  am  pm Fee Paid:  Yes  No

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