

City of Newton



Ruthanne Fuller
Mayor

Inspectional Services Department

Anthony Ciccariello, Commissioner
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Insulation Affidavit

Date: _____

Project Location: _____

Permit Number: _____

Please select one of the following below:

Thermal Barrier
(R-316.4)

YES

Ignition Barrier
(R-316.5.3 & R-316.5.4)

YES

Additional Comments:

Company Information:

Name: _____

Address: _____

Phone Number: _____

Signature: _____