



CITY OF BARRE FIRE DEPARTMENT  
**CODE ENFORCEMENT**



Office of the City Fire Marshal

[www.BarreCity.org](http://www.BarreCity.org)

15 Fourth Street \* Barre \* Vermont \* 05641 \* (802) 477-7833

**Time of Sale Inspection Request**

Name of Building or Association: \_\_\_\_\_

Physical 911 Address: \_\_\_\_\_

Number of Units in Building: \_\_\_\_\_

**Owner Contact Information**

Contact Name: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Date of Request: \_\_\_\_\_ Date of Closing: \_\_\_\_\_

Contact Name to Schedule Inspection: \_\_\_\_\_

Relationship:  Current Owner  Realtor  Condo Association  Other: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**New Owner / Condominium Association Contact Information (if known)**

Contact Name: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**\*Please remember to give the Fire Marshal's Office at least 15 days' advanced notice\***  
 We do our best to meet your deadlines, but can only do so if enough advanced notice is given.

**Fees – Please make checks payable to: City of Barre**

\$125 for Initial Inspection & 1 Re-inspection (additional \$25 for each additional unit)

\$50 for Second Re-inspection (additional \$10 for each additional unit)

**Return to the Permits & Zoning Office: 6 N. Main St., Suite 7, Barre, VT 05641**

\*For Office Use Only\*

Received Date:		Parcel ID:		
Check From:	Check #:	Amount:	Cleared: <input type="checkbox"/> Y <input type="checkbox"/> N	Inspector: