

APPLICATION TO CONSTRUCT, REPAIR, RENOVATE OR DEMOLISH A ONE OR TWO FAMILY DWELLING & ACCESSORY BUILDINGS

This Section For Official Use Only

Approved _____ Date _____ Rejected _____ Date _____ Reason: _____

Signature/Building Commissioner _____ Date _____

SECTION 1 - SITE INFORMATION

1.1 Property Address: House Number _____
 Street Name _____

1.2 Assessors Map, Block & Parcel Number:
 Map Number _____ Block _____ Parcel Number _____

1.3 Zoning Information:
 Zoning District _____ Proposed Use _____

1.4 Property Dimentions:
 Lot Area _____ Frontage (feet) _____

1.5 Building Setbacks (ft)

Front Yard	
Required	Provided

Side Yards	
Required	Provided
/	/

Rear Yard	
Required	Provided

1.6 Water Supply
 (M.G.L. c.40 § 54)

Public Private

1.7 Flood Zone Information:

Zone: _____
 Outside Flood Zone

1.8 Sewage Disposal System:

Municipal
 On-site disposal

SECTION 2 - PROPERTY OWNERSHIP/AGENT

2.1 Property Owner:

Name (Print) _____
 Mailing Address: _____

 Signature _____ Telephone _____

2.2 Authorized Agent:

Name (Print) _____
 Mailing Address: _____

 Signature: _____ Telephone _____

SECTION 3 - CONSTRUCTION SERVICES

3.1 Licensed Construction Supervisor:

License Holders Name _____
 Address _____
 City/State/Zip _____
 Signature _____

Not Applicable
 License Number _____
 Expiration Date _____
 Telephone _____

3.2 Registered Home Improvement Contractor

Company Name _____
 Address _____
 City/State/Zip _____
 Signature _____

Not Applicable
 License Number _____
 Expiration Date _____
 Telephone _____

SECTION 4 - WORKERS' COMPENSATION INSURANCE AFFIDAVIT (M.G.L. c. 152, § 25C(6))

Workers Compensation Insurance affidavit must be completed and submitted with this application. Failure to provide this affidavit will result in the denial of the issuance of the building permit.

Signed Affidavit attached Yes Not Applicable

SECTION 5 - DESCRIPTION OF PROPOSED WORK (check all applicable)

<input type="checkbox"/> New Construction	<input type="checkbox"/> Existing Building	<input type="checkbox"/> Repair(s)
<input type="checkbox"/> Alteration	<input type="checkbox"/> Addition	<input type="checkbox"/> Accessory Bldg.
<input type="checkbox"/> Demolition	<input type="checkbox"/> Other (specify) _____	

Brief Description of Proposed Work:

SECTION 6a - OWNER AUTHORIZATION - TO BE COMPLETED WHEN OWNERS AGENT OR CONTRACTOR APPLIES FOR BUILDING PERMIT

I, _____, as Owner of the subject Property hereby authorize _____ to act on my behalf, in all matters relative to work authorized by this building permit application.

Signature of Owner _____ Date _____

SECTION 6b - OWNER/AUTHORIZED AGENT DECLARATION

I, _____, as Owner/Authorized Agent hereby declare that the statements and information on the foregoing application are true and accurate, to the best of my knowledge and belief.

Signed under the pains and penalties of perjury.

Print Name _____

Signature of Owner/Agent _____ Date _____

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Cost Estimate: Gross Area * Area Modifier * Const. Factor = Const. Cost

Residential: _____ * _____ * _____ = _____
 Garage/Porch/Accessory/Etc: _____ * _____ * _____ = _____
 Basements: _____ * _____ * _____ = _____
 Estimated Construction Cost = \$ _____

_____ * _____ = \$ _____
Construction Cost Fee Multiplier Permit Fee

Amount Paid _____ **Check #** _____