

Permit Fee: \$ _____

GF _____

OS: _____

Inspections:

HIC Contract attached?

CITY OF MARLBOROUGH
MARLBOROUGH, MASSACHUSETTS 01752-3812



Building Permit Application

Received: _____

Permit # _____

Date Issued: _____

I. LOCATION OF PROPERTY

Address _____ Zoning District _____

Lot Description: Map # _____ Parcel # _____ Lot Area _____ Frontage _____

Setback from lot lines on all *new* construction: Front _____ Rear _____ Sides _____

II. APPLICANT Name and Address _____

Phone/cell # _____, facsimile # _____, email _____

III. TYPE AND USE OF BUILDING

Purpose of permit request: New Building _____ Addition _____ Alteration _____ Repair _____

Which category best describes the use?

Residential: _____, Business _____, Automotive _____, Industrial _____

Identify: Use Group (see section 302.1) _____ Construction Type (see table 602) _____

Estimated Cost of Work Proposed under the Permit \$ _____ [reviewer verification _____]

Describe briefly the nature of the work proposed to be completed under this permit application:

Title, date and name shown on the plans: _____

IV. BUILDING CHARACTERISTICS:

Frame: Masonry _____, Wood _____, Structural Steel _____, Other _____.

Type of Heating Fuel: _____ Size of construction: _____ x _____ Area: _____ square feet

Are any of the following included in the work? **Please indicate ALL with either a YES or NO**

Electrical _____ Plumbing _____ Heating _____ Oil Storage _____

Air Conditioning _____ Public Water _____ Private Water _____ Septic System _____

Fire Suppression _____ Fire Detection _____ Gas Fitting _____ Asbestos/Lead Removal _____

V. SPECIAL OR SUPPLEMENTAL APPROVALS MAY BE REQUIRED. PLEASE INDICATE WITH A YES OR NO TO EACH QUESTION

Is construction within 100 feet of a wetland? _____, If so has a Conservation Order of Condition been issued? _____. Provide DEP # 212-_____.

Is License Commission Approval required? _____, if so, list license and attach copy.

Has a Zoning Board of Appeals Variance been granted? _____, If so, attach the "decision" = #_____

Is the property controlled by Formal siteplan review under chapter 63? _____, If so provide the siteplan case # _____ and attach approval conditions _____

Has the City Council issued a Special Permit? _____, If so, provide the decision

How and where will debris be disposed? _____

V. PROPERTY OWNER:

Name: _____ Phone: _____

Address: _____

VI: CONTRACTOR:

Name and Address: _____

Phone/cell # _____, facsimile # _____, email _____

CSL # _____, Home improvement Contractor Registration # _____

Workers Comp. Insurance exemption OR carrier and policy #: _____

VII: ARCHITECT, ENGINEER or Designer: Attach separate summary if multiple jurisdictions:

Name and Address: _____

Phone/cell # _____, facsimile # _____, email _____

VIII: READ CAREFULLY BEFORE SIGNING:

The undersigned applicant certifies that he/she is the legal owner of the property OR **has been authorized** to act as an agent of the owner with their full knowledge and consent. The applicant certifies that they have read, examined and truthfully completed this application in its entirety, that the proposed work and submitted plans are subject to the provisions of the Massachusetts Building Code (780 CMR) and other applicable laws and ordinances of the City of Marlborough, and that any permit issued as a result of this application will be subject to the statements contained in the application and all codes, laws and ordinances.

Name of Applicant (print)

Signature of Applicant