The Commonwealth of Massachusetts
State Board of Building Regulations and Standards
Massachusetts State Building Code
780 CMR

Town of Northbridge Building Department

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

This Section For Official Use Only

Building Permit Number: Date Issued:

Signature: Building Commissioner/Inspector of Buildings Date

SECTION 1 - SITE INFORMATION

1.1 Property Address: 1.2 Assessors Map & Parcel Number:

1.3 Zoning Information:
Zoning District: Proposed Use: 

1.4 Property Dimensions:
Lot Area (sf): Frontage (ft): 

1.5 Building Setbacks (ft)

<table>
<thead>
<tr>
<th>Front Yard</th>
<th>Side Yards</th>
<th>Rear Yard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Required</td>
<td>Provided</td>
<td>Required</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Provided</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Required</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Provided</td>
</tr>
</tbody>
</table>

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 system □

SECTION 2 - PROPERTY OWNERSHIP/AUTHORIZED AGENT

2.1 Owner of Record:
Name (Print): Address for Service:
Signature: Telephone:

2.2 Authorized Agent:
Name (Print): Address for Service:
Signature: Telephone:

SECTION 3 - CONSTRUCTION SERVICES

3.1 Licensed Construction Supervisor:
Licensed Construction Supervisor:
Address
Signature: Telephone:

3.2 Registered Home Improvement Contractor:
Company Name
Address
Signature: Telephone:

Not Applicable □

License Number
Expiration Date

Registration Number
Expiration Date

9/19/97 (Effective 2/28/97) - corrected 780 CMR - Sixth Edition 671
DATE:

DEAR DEPT. HEAD:

IF YOU HAVE ANY CONCERNS REGARDING THIS BUILDING PERMIT APPLICATION PLEASE NOTE THOSE CONCERNS OR OBJECTIONS BELOW. IF THERE ARE NO CONCERNS, PLEASE SIGN AND DATE THE APPLICATION BELOW WHERE INDICATED. THANK YOU.

PROPOSED PROJECT:

PROJECT LOCATION:

OWNER OF PROPERTY:

HAVING REVIEWED THIS APPLICATION FOR A BUILDING PERMIT I HAVE NOTED THE FOLLOWING ISSUES OR CONCERNS: (PLEASE SITE GENERAL LAWS OR RULES AND REGULATIONS WHEREVER APPLICABLE)

APPLICANT MUST DO THE FOLLOWING:

SIGNATURE OF DEPT. HEAD, BOARD/COMMISSION

________________________________________________________________________

APPROVED

TOWN PLANNER: ___________________________ DATE: ______

BOARD OF HEALTH: ___________________________ DATE: ______

CONSERVATION COMM: ___________________________ DATE: ______

FIRE DEPT: ___________________________ DATE: ______

WHITINSVILLE WATER CO: ___________________________ DATE: ______

DPW SEWER: ___________________________ DATE: ______

DPW HIGHWAY: ___________________________ DATE: ______

TREASURER/COLLECTOR: ___________________________ DATE: ______
SECTION 4 - WORKER'S 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...... ☐ No...... ☐

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

New Construction ☐ Existing Building ☐ Repair(s) ☐ Alteration(s) ☐ Addition ☐
Accessory Bldg. ☐ Demolition ☐ Other ☐ Specify:

Brief Description of Proposed Work:

SECTION 6 - ESTIMATED CONSTRUCTION COSTS

<table>
<thead>
<tr>
<th>Item</th>
<th>Estimated Cost (Dollars) to be completed by permit applicant</th>
<th>Official Use Only</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Building</td>
<td></td>
<td>(a) Building Permit Fee Multiplier</td>
</tr>
<tr>
<td>2. Electrical</td>
<td></td>
<td>(b) Estimated Total Cost of Construction from (6)</td>
</tr>
<tr>
<td>3. Plumbing</td>
<td></td>
<td>Building Permit Fee</td>
</tr>
<tr>
<td>4. Mechanical (HVAC)</td>
<td></td>
<td>(a) x (b)</td>
</tr>
<tr>
<td>5. Fire Protection</td>
<td></td>
<td>Check Number</td>
</tr>
<tr>
<td>6. Total = (1 + 2 + 3 + 4 + 5)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

SECTION 7a - 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 7b - 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 __________