YOU ARE REQUIRED TO FILL OUT THE BACKSIDE



CITY OF MELROSE

Building Permit Application To Construct, Repair, Renovate Or Demolish a One- or Two-Family Dwelling FOR MUNICIPALITY USE As of 9/19/13

		This Sec	tion Fo	or Official U	Jse Or	ıly				
Building Permit Number:				Date Applied:						
			l							
Building Official (Print Na	me)			Signatu					Date	
SECTION 1: SITE INFORMATION										
1.1 Property Address:			1. 2 Zoning Information:							
				Zoning District Proposed Use					_	
1.1a Is this an accepted street? yes no			-	Zonnig District 1 roposed Use				J86		
1.5 Building Setbacks (ft)				Side Yards Rear Yard						
Front Yard							Rear Yard			
Required Pro	ovided	L Require	d R	I R L Provided R		R R	equired		Provided	
		/		1						
1.6 Water Supply: (M.G.I	c. 40, §54)	1.7 Flood	Zone Information:			1.8 Se	1.8 Sewage Disposal System:			
Public □ Private □ Z		Zone:				Munic	Municipal □ On site disposal system □			
	CI	ECTION 2:		neck if yes□	WNIET		1			
210 lep 1	51	ECTION 2.	1 KO	I EKIT O	VVINIE	KSIIII				
2.1 Owner ¹ of Record:										
Name (Print) ** Owner's Signature : I hereby attest under the pains and										
penalties of perjury that al	l of the inforn	nation contai	ined in	this applicat	tion is	true and ac	curate to th	ne best of	my knowledge	
and understanding										
No. and street				City		Stat	State		ZIP	
No. and street			City		Sta	Suite		ZII		
Telephone Cell # (Print) Email Address										
SECTION 3: DESCRIPTION OF PROPOSED WORK ² (check all that apply)										
New Construction □ Ex	isting Buildii	по П Ом	ner-Oc	cupied \square	Ren	airs(s)	Alteratio	n(s) □	Addition	
	0						Tiddition =			
	, ,		nber o	Units	- '	Jiner 🗆 S	er 🗆 Specify:			
PRINT a Brief Description of Work ² :										
SECTION 4: ESTIMATED CONSTRUCTION COSTS										
Item Estimated Costs:				Official Use Only						
(Labor and Materials)		•								
1. Building	\$		1. Building Permit Fee(\$12 per thousand): \$							
2. Electrical	\$		2. Admin Fees: \$1			· ———				
3. Plumbing \$				3. Dumpster Fee (\$35 if required) \$ 4. Total All Fees: \$						
4. Mechanical (HVAC)	\$		4. 10	otai Ali Fees	s:			p		
	,		Chan	ık No		Chaole A	mount			
5. Mechanical (Fire	\$		Chec	k No		CHECK P	xmoullt			
Suppression)	\$		□ P _□	id in Full		□ Outete	anding Bala	ance Due		
6. Total Project Cost:	Ψ			III I UII		<u> </u>	manig Dai	mice Duc	·	

SECTION 5: CONSTRUC	TION SE	ERVICES							
5.1 Construction Supervisor License (CSL)									
*									
(D. A. M. COCK H. H.	License Number Expiration Date								
(Print) Name of CSL Holder	List CS	List CSL Type (see below)							
	Туре								
No. and Street		•							
	U R	Unrestricted (Buildings up to 35,000 cu. ft.)							
City/Town, State, ZIP	M	Restricted 1&2 Family Dwelling Masonry							
	RC	Roofing Covering							
	- WS	Window and Siding							
Cell# Telephone#	SF	Solid Fuel Burning Appliances							
	I	Insulation							
Construction Supervisor Signature	D	Demolition							
5.2 Registered Home Improvement Contractor (HIC)	<u>'</u>								
r									
(Print) HIC Company Name or HIC Registrant Name		HIC Registration Number Expiration Date							
(Finit) HIC Company Name of HIC Registrant Name									
No. and Street		WGW II GI							
		HIC Holders Signature							
City/Town, State, ZIP Telephone									
		Email address							
SECTION 6: WORKERS' COMPENSATION INSUR	ANCE A	FFIDAVIT (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 7a: OWNER AUTHORIZATION TO BE COMPLETED WHEN									
OWNER'S AGENT OR CONTRACTOR APPLIES FOR BUILDING PERMIT									
I, as Owner of the subject property, hereby authorize (print name)									
act on my behalf, in all matters relative to work authorized by this building permit application.									
/									
Print Owner's Name / Signat	ture	Date							
SECTION 7b: OWNER ¹ OR AUTHORIZED AGE	NIT DEC	I ADATION OD CCI HOLDED							
SECTION /B: OWNER OR AUTHORIZED AGE	ENT DEC	LARATION OR CSL HOLDER							
By entering my name below, I hereby attest under the pains and									
contained in this application is true and accurate to the best of m	y knowled	lge and understanding.							
		<u> </u>							
Signature of; Owner's or Authorized Agent's/ CSL Holder Name	Date								
NOTES:									
1. An Owner who obtains a building permit to do his/her own (not registered in the Home Improvement Contractor (HIC) program or guaranty fund under M.G.L. c. 142A. Other impwww.mass.gov/oca Information on the Construction Superv	Program), ortant inforisor Licen	will <u>not</u> have access to the arbitration ormation on the HIC Program can be found at see can be found at <u>www.mass.gov/dps</u>							
In accordance with M.G.Lc. 40 §54A. A condition of this per disposed of in a licensed waste facility as defined by M.G.L.111									
site . *Dumpster Co. Name	site *Dumpster Co. Name Address								