

 <p>The Commonwealth of Massachusetts State Board of Building Regulations and Standards Massachusetts State Building Code 780 CMR</p>		 <p>TOWN OF NAHANT BUILDING DEPARTMENT, TOWN HALL 334 Nahant Road, NAHANT, MA 01908</p>			
APPLICATION TO CONSTRUCT, REPAIR, RENOVATE, OR DEMOLISH A ONE OR TWO FAMILY DWELLING					
This Section For Official Use Only					
Application Number:	Date Issued:	Permit Number:	FEE: \$	Check No. :	Date Paid :
<i>R-10-1302</i>	<i>6/28/2010</i>	<i>10-R-0217</i>	<i>300</i>		<i>6/28/2010</i>
SECTION 1 - SITE INFORMATION					
1.1 Property Address:		<i>140 WILLOW RD</i>		1.2 Assessors Map & Parcel Number:	
		Map Number	<i>7</i>	Parcel Number	<i>7 0 18</i>
1.3 Zoning Information			1.4 Property Dimensions:		
Zoning District		Proposed Use		Lot Area (sf)	<i>0.18329</i>
				Frontage (ft.)	
1.5 Building Setbacks (ft.)					
	Front (ft.)	Side (ft.)	Rear (ft.)	Distance from wetland	
Required		L. R.		ft.	
Provided		L. R.			
1.6 Water Supply (M.G.L.c.40.* 54)		1.7 Flood Zone		1.8 Sewage Disposal System :	
Public : <input checked="" type="radio"/> Private : <input type="radio"/>		Zone : <input type="checkbox"/> Outside Flood Zone : <input type="checkbox"/>		Municipal : <input checked="" type="radio"/> On site disposal system : <input type="radio"/>	
SECTION 2 - PROPERTY OWNERSHIP/AUTHORIZED AGENT					
2.1 Owner of Record:					
Name <i>PETERSON, LINDA S & PETERSON, WILLIAM F T/E</i>			Address <i>140 WILLOW RD</i>		
Signature			Telephone No. <i>7815810097</i>	Alternate Telephone No.	
City <i>NAHANT</i>			State <i>MA</i>	Zip <i>01908</i>	
2.2 Authorized Agent:					
Name <i>Mario S Spinucci</i>			Address <i>12 Sunset Rd Nahant MA 01908</i>		
Signature			Telephone No. <i>7815816266</i>	Alternate Telephone No.	

SECTION 3 - CONSTRUCTION SERVICES				
3.1 Licensed Construction Supervisor:				
Licensed Construction Supervisor	<i>M.S. Construction</i>			
Address	<i>12 Sunset Rd.</i>	License Number	<i>46132</i>	
Town/City	<i>Nahant</i>	State	<i>MA</i>	
Zip	<i>01908</i>	Telephone	<i>7815816266</i>	
Signature		Expiration Date	<i>8/13/2011</i>	
3.2 Home Improvement Supervisor:				
Company Name	<i>M.S. Construction</i>	Address	<i>12 Sunset Rd</i>	
Telephone	<i>7815816266</i>	Registration Number	<i>104872</i>	
Signature		Expiration Date	<i>7/15/2012</i>	
City	<i>Nahant</i>	State	<i>MA</i>	
Zip	<i>01908</i>			
SECTION 4- WORKER'S COMPENSATION INSURANCE(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 <input checked="" type="checkbox"/> No <input type="checkbox"/>				
SECTION 5- DESCRIPTION OF PROPOSED WORK (check all applicable) <input type="radio"/> 6th Edition <input checked="" type="radio"/> 7th Edition				
<input type="checkbox"/> New Construction	<input type="checkbox"/> Existing Building	<input type="checkbox"/> Repair(s)	<input checked="" type="checkbox"/> Alteration(s)	
<input type="checkbox"/> Accessory Bldg	<input type="checkbox"/> Demolition	<input type="checkbox"/> Fence	<input type="checkbox"/> Home Occupation	
<input type="checkbox"/> Wood Stove	<input type="checkbox"/> Pool AG	<input type="checkbox"/> Pool IG	<input type="checkbox"/> Deck	
<input type="checkbox"/> Tent	<input type="checkbox"/> Retaining Wall	<input type="checkbox"/> Roof	<input type="checkbox"/> Siding	
			<input type="checkbox"/> Addition	
			<input type="checkbox"/> Shed/Barn	
			<input type="checkbox"/> Tenat Fitup(Commercial only)	
			<input type="checkbox"/> Other Specify:	
Brief Description of Proposed Work:				
<i>Replace decking on 2nd floor deck.and front stairs. Remodel 1st floor kitchen with new walls, ceiling floors and cabinets. New plumbing and electrical in kitchen.</i>				
SECTION 6 - ESTIMATED CONSTRUCTION COSTS				
Item	Estimated Cost (Dollars) to be completed by permit applicant		Official Use Only	
1. Building	<i>30000</i>		Story	
2. Electrical			Number of Dwelling units	
3. Plumbing			Comments	
4. Mechanical (HVAC)				
5. Fire Protection				
Total = (1+2+3+4+5)	30000			
Building Permit Fee Multiplier				
Total Building Permit Fee				

SECTION 7(a) OWNER AUTHORIZATION-TO BE COMPLETED WHEN OWNERS AGENT OR CONTRACTORS APPLIES FOR BUILDING PERMIT	
I, PETERSON, LINDA S & PETERSON, WILLIAM F T/E , as Owner of the subject property hereby authorize Mario S Spinucci to act on my behalf, in all matters relative to work authorized by this building permit application	
Signature of Owner	Date 6/24/2010
SECTION 7(b) OWNER AUTHORIZED AGENT DECLARATION	
I, Mario S Spinucci , 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.	
Signature of Owner/Agent	Date 6/24/2010
SECTION 8 - THIS SECTION FOR OFFICIAL USE ONLY	
Approved/Disapproved by Zoning Authority:	
Approved/Disapproved by Board of Health:	
Approved/Disapproved by Conservation Commission:	
Approved/Disapproved by Building Department:	
Approved/Disapproved by Fire Department:	