

 <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>				
<p>APPLICATION TO CONSTRUCT, REPAIR, RENOVATE, OR DEMOLISH A ONE OR TWO FAMILY DWELLING</p>					
<p>This Section For Official Use Only</p>					
Application Number:	Date Issued:	Permit Number:	FEE: \$	Check No. :	Date Paid :
R-11-1993	11/22/2011	R-11-0336	98	1139	11/22/2011
SECTION 1 - SITE INFORMATION					
1.1 Property Address:		85 WILLOW RD		1.2 Assessors Map & Parcel Number:	
		Map Number	12C	Parcel Number	12C 0 27
1.3 Zoning Information			1.4 Property Dimensions:		
Zoning District		Proposed Use		Lot Area (sf)	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) Public : Private :		1.7 Flood Zone Zone : <input type="checkbox"/> Outside Flood Zone : <input type="checkbox"/>		1.8 Sewage Disposal System : Municipal : On site disposal system :	
SECTION 2 - PROPERTY OWNERSHIP/AUTHORIZED AGENT					
2.1 Owner of Record:					
Name WOODHEAD, GAIL A		Address 85 WILLOW RD			
Signature		Telephone No. 7815815753	Alternate Telephone No.		
City NAHANT		State MA	Zip 01908		
2.2 Authorized Agent:					
Name HIGH GRADE WINDOW & DOOR CO		Address			
Signature		Telephone No. 7815925027	Alternate Telephone No. 7815925027		

SECTION 3 - CONSTRUCTION SERVICES			
3.1 Licensed Construction Supervisor:			
Licensed Construction Supervisor	<i>MICHAEL ROSEN</i>		
Address	<i>41 SUTTON ST</i>	License Number	<i>32181</i>
Town/City	<i>LYNN</i>	State	<i>MA</i>
Zip	<i>01901</i>	Telephone	<i>7815925027</i>
Signature		Expiration Date	<i>3/17/2012</i>
3.2 Home Improvement Supervisor:			
Company Name		Address	
Telephone		Registration Number	
Signature		Expiration Date	
City		State	
Zip			
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 type="radio"/> 7th Edition			
<input type="checkbox"/> New Construction	<input type="checkbox"/> Existing Building	<input type="checkbox"/> Repair (s)	<input 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 checked="" type="checkbox"/> Other Specify: <i>WINDOWS & DOORS</i>
Brief Description of Proposed Work:			
<i>REPLACE WINDOWS & DOORS</i>			
SECTION 6 - ESTIMATED CONSTRUCTION COSTS			
Item	Estimated Cost (Dollars) to be completed by permit applicant	Official Use Only	
1. Building	<i>9800.00</i>	Story	<input type="text"/>
2. Electrical		Number of Dwelling units	<input type="text"/>
3. Plumbing		Comments	<input type="text"/>
4. Mechanical (HVAC)			
5. Fire Protection			
Total = (1+2+3+4+5)	9800		
Building Permit Fee Multiplier	<input type="text"/>		
Total Building Permit Fee	<input type="text"/>		

SECTION 7(a) OWNER AUTHORIZATION-TO BE COMPLETED WHEN OWNERS AGENT OR CONTRACTORS APPLIES FOR BUILDING PERMIT	
I, WOODHEAD, GAIL A , as Owner of the subject property hereby authorize HIGH GRADE WINDOW & DOOR CO to act on my behalf, in all matters relative to work authorized by this building permit application	
Signature of Owner	Date 11/18/2011
SECTION 7(b) OWNER AUTHORIZED AGENT DECLARATION	
I, HIGH GRADE WINDOW & DOOR CO , 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 11/18/2011
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:	