

 <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>
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**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 :
R-12-2444	9/13/2012	R-12-0326	20	6392	9/13/2012

**SECTION 1 - SITE INFORMATION**

<b>1.1 Property Address:</b>	261 NAHANT RD	<b>1.2 Assessors Map &amp; Parcel Number:</b>			
		<b>Map Number</b>	11	<b>Parcel Number</b>	11 0 21

<b>1.3 Zoning Information</b>			<b>1.4 Property Dimensions:</b>		
<b>Zoning District</b>		<b>Proposed Use</b>	<b>Lot Area (sf)</b>	<b>Frontage (ft.)</b>	

**1.5 Building Setbacks (ft.)**

	<b>Front (ft.)</b>	<b>Side (ft.)</b>	<b>Rear (ft.)</b>	<b>Distance from wetland</b>
<b>Required</b>		L. R.		ft.
<b>Provided</b>		L. R.		

<b>1.6 Water Supply (M.G.L.c.40.* 54)</b> Public :                      Private :	<b>1.7 Flood Zone</b> Zone :                      Outside Flood Zone : <input type="checkbox"/>	<b>1.8 Sewage Disposal System :</b> Municipal :                      On site disposal system :
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**SECTION 2 - PROPERTY OWNERSHIP/AUTHORIZED AGENT**

**2.1 Owner of Record:**

<b>Name</b> <span style="color: red;">FRARY ROBERT A &amp;</span>	<b>Address</b> <span style="color: red;">261 NAHANT RD</span>	
<b>Signature</b>	<b>Telephone No.</b> <span style="color: red;">9787448143</span>	<b>Alternate Telephone No.</b>
<b>City</b> <span style="color: red;">NAHANT</span>	<b>State</b> <span style="color: red;">MA</span>	<b>Zip</b> <span style="color: red;">01908</span>

**2.2 Authorized Agent:**

<b>Name</b> <span style="color: red;">Eric Palm</span>	<b>Address</b> <span style="color: red;">3 Hilton St. Salem, MA 01970</span>	
<b>Signature</b>	<b>Telephone No.</b> <span style="color: red;">9787448143</span>	<b>Alternate Telephone No.</b>

<b>SECTION 3 - CONSTRUCTION SERVICES</b>			
<b>3.1 Licensed Construction Supervisor:</b>			
Licensed Construction Supervisor	<i>Eric Palm</i>		
Address	<i>61R Jefferson Ave</i>	License Number	<i>87977</i>
Town/City	<i>Salem</i>	State	<i>MA</i>
Zip	<i>01970</i>	Telephone	<i>9787448143</i>
Signature		Expiration Date	<i>4/23/2014</i>
<b>3.2 Home Improvement Supervisor:</b>			
Company Name	<i>Atlantic Weatherization</i>	Address	<i>61R Jefferson Ave</i>
Telephone	<i>9787448143</i>	Registration Number	<i>142089</i>
Signature		Expiration Date	<i>3/14/2014</i>
City	<i>Salem</i>	State	<i>MA</i>
Zip	<i>01970</i>		
<b>SECTION 4- WORKER'S COMPENSATION INSURANCE(M.G.L.c.152* 25C(6))</b>			
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"/>			
<b>SECTION 5- DESCRIPTION OF PROPOSED WORK (check all applicable)</b> <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 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:
<b>Brief Description of Proposed Work:</b>			
<i>Thermal cover over attic stairs/ Air seal attic all home penetrations/ add fiberglass to attic, bring to R-38/ add propervents to soffits.</i>			
<b>SECTION 6 - ESTIMATED CONSTRUCTION COSTS</b>			
<b>Item</b>	<b>Estimated Cost (Dollars) to be completed by permit applicant</b>	<b>Official Use Only</b>	
1. Building	<i>1700</i>	Story	<input type="text"/>
2. Electrical		Number of Dwelling units	<input type="text"/>
3. Plumbing			Comments
4. Mechanical (HVAC)			
5. Fire Protection			
Total = (1+2+3+4+5)	1700		
Building Permit Fee Multiplier	<input type="text"/>		
Total Building Permit Fee	<input type="text"/>		

<b>SECTION 7(a) OWNER AUTHORIZATION-TO BE COMPLETED WHEN OWNERS AGENT OR CONTRACTORS APPLIES FOR BUILDING PERMIT</b>	
I, <b>FRARY ROBERT A &amp;</b> , as Owner of the subject property hereby authorize <b>Eric Palm</b> to act on my behalf, in all matters relative to work authorized by this building permit application	
Signature of Owner	Date <b>9/10/2012</b>
<b>SECTION 7(b) OWNER AUTHORIZED AGENT DECLARATION</b>	
I, <b>Eric Palm</b> , 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 <b>9/10/2012</b>
<b>SECTION 8 - THIS SECTION FOR OFFICIAL USE ONLY</b>	
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:	