

 <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-12-2100	1/18/2012	R-12-0029	60		1/18/2012

SECTION 1 - SITE INFORMATION

1.1 Property Address:	63 CASTLE RD	1.2 Assessors Map & Parcel Number:			
		Map Number	24	Parcel Number	24 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)		1.7 Flood Zone		1.8 Sewage Disposal System :	
Public : Private :		Zone : Outside Flood Zone : <input type="checkbox"/>		Municipal : On site disposal system :	

SECTION 2 - PROPERTY OWNERSHIP/AUTHORIZED AGENT

2.1 Owner of Record:					
Name DILL, DANIEL		Address 63 CASTLE ROAD			
Signature		Telephone No. 1111111111	Alternate Telephone No.		
City NAHANT		State MA	Zip 01908		
2.2 Authorized Agent:					
Name mackspainting&carpenyry		Address 185 walnut st			
Signature		Telephone No. 7815993773	Alternate Telephone No. 9784232642		

SECTION 3 - CONSTRUCTION SERVICES			
3.1 Licensed Construction Supervisor:			
Licensed Construction Supervisor	<i>John Perry</i>		
Address	<i>185 Walnut St</i>	License Number	<i>065399</i>
Town/City	<i>Lynn</i>	State	<i>MA</i>
Zip	<i>01905</i>	Telephone	<i>7815993773</i>
Signature		Expiration Date	<i>6/25/2012</i>
3.2 Home Improvement Supervisor:			
Company Name	<i>John Perry</i>	Address	<i>185 Walnut St</i>
Telephone	<i>7815993773</i>	Registration Number	<i>065399</i>
Signature		Expiration Date	
City	<i>Lynn</i>	State	<i>MA</i>
Zip	<i>01905</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 type="radio"/> 7th Edition			
<input type="checkbox"/> New Construction	<input checked="" 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 checked="" 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>Create flat roof on existing accessory bldg.</i>			
SECTION 6 - ESTIMATED CONSTRUCTION COSTS			
Item	Estimated Cost (Dollars) to be completed by permit applicant	Official Use Only	
1. Building	<i>6000</i>	Story	<input style="width:100%;" type="text"/>
2. Electrical		Number of Dwelling units	<input style="width:100%;" type="text"/>
3. Plumbing		Comments	<input style="width:100%; height: 40px;" type="text"/>
4. Mechanical (HVAC)			
5. Fire Protection			
Total = (1+2+3+4+5)	<input style="width:100%;" type="text" value="6000"/>		
Building Permit Fee Multiplier	<input style="width:100%;" type="text"/>		
Total Building Permit Fee	<input style="width:100%;" type="text"/>		

SECTION 7(a) OWNER AUTHORIZATION-TO BE COMPLETED WHEN OWNERS AGENT OR CONTRACTORS APPLIES FOR BUILDING PERMIT	
I, <i>DILL, DANIEL</i> , as Owner of the subject property hereby authorize <i>mackspainting&carpenyry</i> to act on my behalf, in all matters relative to work authorized by this building permit application	
Signature of Owner	Date <i>1/13/2012</i>
SECTION 7(b) OWNER AUTHORIZED AGENT DECLARATION	
I, <i>mackspainting&carpenyry</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.	
Signature of Owner/Agent	Date <i>1/13/2012</i>
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:	