



**TOWN OF NORTHBOROUGH
BUILDING DEPARTMENT**

63 Main Street Northborough, MA 01532
Phone 508-393-5010 Fax 508-393-3130

**APPLICATION FOR PLAN EXAMINATION AND
BUILDING PERMIT FOR ONE OR TWO FAMILY
DWELLING OR ACCESSORY STRUCTURE**

Map# _____

Parcel# _____

Zone(s): _____

GWPO Area(s): _____

Lot/Structure:

☐ Conf. ☐ Non-Conf.

PROPERTY ADDRESS: _____

SUBDIVISION _____ LOT# _____ LOT SIZE _____ Sq. Ft.

SECTION 1 - TYPE AND COST OF BUILDING - all applicants - complete Parts A - D

A. TYPE OF IMPROVEMENT

- ☐ New Building/Structure
☐ Addition
☐ Alteration
☐ Repair, replacement
☐ Demolition
☐ Other

B. PROPOSED USE (for demolition, most recent use)

- ☐ One Family Dwelling
☐ Two Family Dwelling
☐ Swimming Pool
☐ Other, specify _____
- ☐ Deck
☐ Garage
☐ Shed

BRIEF DESCRIPTION OF PROPOSED PROJECT:

C. COST

Building \$ _____
Electrical \$ _____
Plumbing \$ _____
Heating/air conditioning \$ _____
Fire Protection \$ _____
TOTAL \$ _____

D. OWNERSHIP

- ☐ Private (individual, corporation or non-profit institution)
☐ Public (federal, state or local government)

SECTION II - SELECTED CHARACTERISTICS OF BUILDING

(for new buildings, additions and alterations -complete E-H)

**E. PRINCIPAL TYPE OF
HEATING FUEL**

- ☐ Gas
☐ Oil
☐ Electricity
☐ Other - Specify: _____

F. TYPE OF SEWERAGE DISPOSAL

☐ Public ☐ Private

G. TYPE OF WATER SUPPLY

☐ Public ☐ Private, well

H. RESIDENTIAL DWELLING :

Number of Bedrooms:

Existing: _____

Deleted: _____

Proposed: _____

TOTAL: _____

SECTION III - THE FOLLOWING QUESTIONS MUST BE ANSWERED - NO EXCEPTIONS

Will any wetlands be filled? _____ Will there be any excavation within 100 feet of a wetland? _____

Will there be any excavation within 200 feet of a river or stream? _____

Does an open culvert leave or discharge on the lot? _____

Does this lie within a flood zone (F.I.R.M.)? ☐ Yes ☐ No

Will any trees at the road be removed on town property? _____

Is this a "Scenic Road" (Northborough Zoning Bylaw 7-36)? ☐ No

☐ Yes Will any part of a stone wall on the Town's portion of property be removed? ☐ Yes ☐ No

For Department Use Only: Date Received

(Please complete both sides)

SECTION IV – PROPERTY OWNERSHIP – to be completed by all applicants

Owner of Record (please print) _____ Mailing Address: street, town/city/state/zip _____ () Telephone number _____

SECTION V – OWNER AUTHORIZATION – To be completed when contractor or agent is applicant

As owner of the subject property I hereby authorize _____ Contractor / Agent (please print)
to act on my behalf in all matters relative to the work authorized by this building permit application.
_____/_____/_____
Signature of Owner Date

SECTION VI – CONSTRUCTION SERVICES

A. Licensed Construction Supervisor: <input type="checkbox"/> Not applicable for this project (go to B) <input type="checkbox"/> Homeowner License Exemption – submit “HOMEOWNER LICENSE EXEMPTION” Affidavit <input type="checkbox"/> _____ Name of Licensed Construction Supervisor: (please print) _____ License Number _____ / / _____ Address street, town/city, state zip _____ Signature _____ () Telephone number _____	<input checked="" type="checkbox"/> Check Appropriate Box(es) _____ / / _____ H.I.C.R Exemption – Submit ‘HOME IMPROVEMENT CONTRACTOR LAW’” Affidavit. <input type="checkbox"/> _____ Company Name or Person please print _____ HICR # _____ Expiration Date _____ Address street, town/city, state zip _____ Signature _____ () Telephone number _____
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C. Workman Compensation Insurance: (check appropriate box) ☐ Certificate of Insurance ☐ Affidavit

SECTION VII – APPLICANT DECLARATION CONSTRUCTION - ALL APPLICANTS MUST COMPLETE

I, _____, as Owner / Contractor / Agent hereby declare that the
(Please print) (Circle one)
statements and information on the foregoing application are true and accurate, to the best of my knowledge and belief.
Signed under the pains and penalties of perjury.
_____/_____/_____
Signature of Applicant Date

FOR DEPARTMENT USE ONLY

USE GROUP: _____ CONST. TYPE: _____ BUILDING PERMIT NUMBER: _____ BP- _____	REMARKS/NOTES:
BUILDING PERMIT ISSUED: _____ / _____ / _____ BUILDING PERMIT FEE: \$ _____ Ck# / Cash _____ / _____ APPROVED BY: _____ / _____ / _____ Inspector of Buildings / Local Inspector Date	Munis: <input type="checkbox"/> “OK” _____ Historic Building: yes/ no _____ Signatures: <input type="checkbox"/> No signature required <input type="checkbox"/> Signature Sheet returned