



The Commonwealth of Massachusetts
 State Board of Building Regulations and Standards
 Massachusetts State Building Code
 780 CMR

Town of Mashpee
 Building Department
 16 Great Neck Road North

APPLICATION TO CONSTRUCT, REPAIR, RENOVATE OR DEMOLISH A ONE OR TWO FAMILY DWELLING

This Section For Official Use Only

Building Permit Number:	Date Issued:
Signature: _____ <small>Building Commissioner/Inspector of Buildings</small> <small>Date</small>	

SECTION 1. - SITE INFORMATION

1.1 Property Address: _____ _____		1.2 Assessors Map & Parcel Number: _____ <small>Map Number</small> <small>Parcel Number</small>			
1.3 Zoning Information: _____ <small>Zoning District</small> <small>Proposed Use</small>		1.4 Property Dimensions: Lot Coverage %: _____ _____ <small>Lot Area (sf)</small> <small>Frontage (ft)</small>			
1.6 Building Setbacks (ft)					
Front Yard		Side Yards		Rear Yard	
Required	Provided	Required	Provided	Required	Provided
		/	/		
1.7 Water Supply (M.G.L. c. 40, § 54) Public <input type="checkbox"/> Private <input type="checkbox"/>		1.5 Flood Zone Zone _____ Map _____ Outside Flood Zone <input type="checkbox"/>		1.8 Sewage Disposal System: Municipal <input type="checkbox"/> On site disposal system <input type="checkbox"/>	

SECTION 2. - PROPERTY OWNERSHIP / AUTHORIZED AGENT

2.1 Owner of Record:	
Name (Print) _____	Address _____
Signature _____	Telephone _____
2.2 Authorized Agent:	
Name (Print) _____	Address _____
Signature _____	Telephone _____

SECTION 3. - CONSTRUCTION SERVICES

3.1 Licensed Construction Supervisor:		Not Applicable <input type="checkbox"/>
Licensed Construction Supervisor _____		License Number _____
Address _____		Expiration Date _____
Signature _____	Telephone _____	
3.2 Registered Home Improvement Contractor:		Not Applicable <input type="checkbox"/>
Company Name _____		License Number _____
Address _____		Expiration Date _____
Signature _____	Telephone _____	