



TOWN OF GRANVILLE

707 Main Road / Town Hall • P.O. Box 247 • Granville, MA 01034

Building Permit Application

Date _____

Building Permit Number _____

Issued: Signature: _____
Building Official/Inspector

SECTION 1 - SITE INFORMATION

Property Address _____ Assessors Map Number _____ Parcel Number _____
Owner's Name _____ Home Telephone # _____
Home Address _____ Work Telephone # _____
Building Setbacks (ft). Front _____ Left Side _____ Right Side _____ Back _____
Other _____

SECTION 2 - CONSTRUCTION SERVICES

Company Name _____ Company Address _____
Telephone _____
Licensed Construction Supervisor _____ MA License No. _____
Home Improvement Contractor _____ MA License No. _____
SIGNATURE: _____ EXP. DATE: LCS _____ HIC _____
Attach a copy of LCS and/or HIC Registration

SECTION 3 - DESCRIPTION OF PROPOSED WORK (check all applicable)

☐ New Construction ☐ Existing Building ☐ Modular ☐ Other
☐ Repair(s) ☐ Alteration(s) ☐ Addition ☐ Foundation ☐ Demolition
☐ Deck ☐ Porch ☐ Dormer(s) ☐ Ramps ☐ Garage Number of Bays _____
☐ Increasing Size of Living Space Location _____

SECTION 4 - DESCRIPTION OF PROPOSED WORK - SQUARE FEET - FEET

Proposed Use of Building _____ Est. Construction Costs (ALL) \$ _____
Size of Building _____ (Over All)
Size of Building 1st Floor _____ x _____ = Square Feet _____
2nd Floor _____ x _____ = Square Feet _____
Other _____ x _____ = Square Feet _____
Other _____ x _____ = Square Feet _____
TOTAL SQUARE FEET _____ X (FEE) \$ _____ = \$ _____
TOTAL FEES PAID \$ _____ CHECK # _____ FIXED FEE \$ _____

CHECKS MADE PAYABLE TO THE TOWN OF GRANVILLE

(Over)

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No. of floors _____ No. of Rooms _____ No. of Bedrooms _____ No. of Baths _____
Basement: ☐ Full: Sq feet _____ ☐ Crawl space: Sq feet _____
Type: ☐ Concrete: Thickness _____
Material of building _____ Material of roof _____ Chimney _____ # _____ Flues # _____
Material of Chimney _____ Fireplace _____ Wood stove _____ Pellet stove _____
☐ Modular Home ☐ Log Home ☐ Manufacturer _____
Address _____ Telephone _____

SECTION 5 - REQUIRED FORMS AND PLANS

WORKER'S COMPENSATION INSURANCE AFFIDAVIT (M.G.L. c.152 s.25C(6))

Worker's Compensation insurance affidavit must be completed and submitted with this application. Failure to provide this affidavit will result in the denial of issuance of the building permit.

Signed Affidavit Attached ☐ YES ☐ NO
Copy of Declaration page of policy must be attached. ☐ YES ☐ NO

	YES	NO
A. One set of Site Plans	_____	_____
B. Two sets of Building Plans as required on (For all 1 & 2 Family Project Page)	_____	_____
C. Energy Conservation Application (Appendix J)	_____	_____
D. Homeowners Exemption Form (Where Needed)	_____	_____
E. Wood Stove Installation Application	_____	_____
F. Completed Building Approval Sheet (BAS) with All Sign-offs.	_____	_____
G. For demolition. DEP # BWPAQ06 Notification form	_____	_____

SECTION 6 - OWNERS AUTHORIZATION -TO BE COMPLETED WHEN OWNER'S AGENT OR CONTRACTOR APPLIES FOR BUILDING PERMIT.

I, _____, as Owner of the subject property hereby authorize _____
_____ to act on my behalf in all matters relative to work authorized by this building application.

OWNER _____ DATE _____
Owner Signature

SECTION 7 - OWNER/AUTHORIZED AGENT DECLARATION

I _____ as Owner/Authorized Agent hereby declare
that the statement 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.

PRINT NAME _____

SIGNATURE OF OWNER/AGENT _____ DATE _____