



TOWN OF LINCOLN BUILDING PERMIT APPLICATION

WWW.LINCOLNTOWN.ORG/BUILD.HTM

BUILDING DEPARTMENT USE ONLY

Fee \$ _____ Cash Check Permit No.: _____

Date Submitted: _____

Plans Submitted: _____ Plans Not Required: _____

Approved for Issuance: _____

Date Building Inspector

This application must be completed in full at the time of submittal. It is the applicant's responsibility to establish if such permits, etc., are needed for the particular project and to submit such information with the permit application. Failure to do so will result in permit delays and may be considered fraudulent submission of a permit application.

LOCATION:

Map & Parcel Street Address

Name of Owner _____

Location _____

Name of Builder _____

Address _____

Comm. Of Mass License # _____ Home Improvement # _____

Phone # _____

DESCRIPTION OF PROPOSED WORK

- New Building Addition Alteration Repair Pool Deck Demolition
 Roofing Siding Change in Use/Occupancy Other

Will the proposed construction affect the building footprint? Yes No. If yes, Plot Plan required.

Provide a complete description of work. This is in addition to "attached plans."

VALUE: Estimated construction value \$ _____

ZONING AND PERMIT INFORMATION (FOR TOWN USE ONLY):

Zoning District: _____ Lot Area: _____ Frontage: _____

Present Use: _____ Proposed Use: _____

SETBACKS: FRONT L. SIDE R. SIDE REAR

Existing: _____

Proposed: _____

HEIGHT: Existing: _____ No. of Bedrooms: Existing: _____

Proposed: _____ Proposed: _____

	<u>Yes</u>	<u>No</u>	<u>Dept. Initials</u>
<u>Planning Board:</u>			
Is this property part of a cluster sub-division?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Planning Board Subdivision Approval required?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Is this an "Approval Not Required (ANR) lot?"	<input type="checkbox"/>	<input type="checkbox"/>	_____
Lot located on a Scenic Road?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Will the lot require a curb cut?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Is this a vacant or undeveloped lot?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Will square footage of the structures exceed 8% of the lot area or 6500 sq. ft.?	<input type="checkbox"/>	<input type="checkbox"/>	_____
<u>Conservation Commission:</u>			
Wetland permit required from Conservation Commission?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Is property subject to conservation restriction?	<input type="checkbox"/>	<input type="checkbox"/>	_____
<u>Building Department:</u>			
Lot presently nonconforming and approval required by Board of Appeals?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Board of Health/ Title 5 approval required?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Demolition permit required?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Lot located within a Historic District?	<input type="checkbox"/>	<input type="checkbox"/>	_____

If "yes" to any of the above, approvals are required prior to Building Department review.

NOTES:

ADDITIONAL ASPECTS OF THIS WORK

	<u>Yes</u>	<u>No</u>		<u>Yes</u>	<u>No</u>
ELECTRICAL	<input type="checkbox"/>	<input type="checkbox"/>	PRIVATE WATER	<input type="checkbox"/>	<input type="checkbox"/>
PLUMBING	<input type="checkbox"/>	<input type="checkbox"/>	PUBLIC WATER	<input type="checkbox"/>	<input type="checkbox"/>
GAS	<input type="checkbox"/>	<input type="checkbox"/>	FIRE DETECTION	<input type="checkbox"/>	<input type="checkbox"/>
MECHANICAL (HVAC)	<input type="checkbox"/>	<input type="checkbox"/>	INCREASE # OF BEDROOMS	<input type="checkbox"/>	<input type="checkbox"/>
HEATING	<input type="checkbox"/>	<input type="checkbox"/>	SEPTIC SYSTEM	<input type="checkbox"/>	<input type="checkbox"/>
OIL STORAGE	<input type="checkbox"/>	<input type="checkbox"/>	SIGN(S)	<input type="checkbox"/>	<input type="checkbox"/>

Is this lot located on land formerly used as a railroad right of way or any property appurtenant thereto formerly used by any railroad company and requiring approval of the Executive Office of Transportation and Construction in accordance with MGL C40 §54A

Yes No

NOTE: For each "yes" box checked additional permits or approvals maybe required.

In accordance with the requirements of MGL C40 and §54 and MGL C111 §150A, please supply the following information relative to solid waste disposal in connection with this project.

Waste Disposal Company: _____ Tele: _____
 Disposal Site Location: _____

PROPOSED FLOOR AREAS & ESTIMATED COST OF CONSTRUCTION

	Area	Estimated Cost
Unfinished Basement		
Finished Basement		
First Floor		
Second Floor		
Attic (livable)		
Garage		
Deck, Porch, Other (please specify)		
Total		

BUILDING CODE INFORMATION

Building Use Group(s): Existing: _____ Proposed: _____
 Hazard Index (See 780CMR 34): Existing: _____ Proposed: _____
 Building Construction Type: _____ Fully sprinklered? Yes No

Building Height & Area Information:

Building Area	Existing	Proposed
Number of floors (including basement)		
Floor Area per floor		
Total Building Area		
Total Building Height		

Independent Structural Engineering Review Required? Yes No

HOME IMPROVEMENT CONTRACTOR AFFIDAVIT

MGL 142A requires that the “reconstruction, alteration, renovation, repair, modernization, conversion, improvement removal demolition or construction of an addition to any pre-existing owner-occupied building containing at least one but not more than four dwelling units...or to structures which are adjacent to such residence or building” be done by registered contractors, with certain exceptions, along with other requirements.

I hereby certify that registration is not required for the following reason(s):

- Owner securing own permit (i.e., homeowner permit)
- Building not owner occupied
- Construction cost under \$1,000.00
- Work excluded by law
- Other (specify)

Signed under the penalties of perjury, I hereby apply for a permit as the agent for the owner:

(Contractor name-print)

Contractor signature

Registration No.

Homeowner waiver:

Owners securing their own permit or dealing with unregistered contractors for applicable home improvement work do not have access to the arbitration program or guaranty fund under MGL C142A. IF you wish to waive your rights to file a claim under the arbitration program or guaranty fund, then sign here. Otherwise, have the contractor complete the information above.

CERTIFICATION (Please read before signing)

The undersigned hereby certifies that he/she has read and examined this application and that the proposed work is accurately represented in the statements made in this application and that the work shall be executed in accordance with the Mass State Building Code, Lincoln Bylaws, and all other applicable laws and ordinances in effect on the date of issuance as provided for in MGL Chapter 40A, Section 6.

Signatures: _____
Owner/Authorized Agent

Date