DEVENS ENTERPRISE COMMISSION DEVENS REGIONAL ENTERPRISE ZONE PERMIT APPLICATION LEVEL 2	DEC NO DATE: FEE:
ESTIMATED COST OF CONSTRUCTION / IMPROVE	
OWNER	APPLICANT
ADDRESS	ADDRESS
TOWN/STATE	TOWN/STATE
PHONE FAX	PHONEFAX
SIGNATURE	SIGNATURE
Type or print name and title	Type or print name and title
attorney, or other "development team" personnel. SITE / LOCATION / STREET LOT SIZE / TOTAL PARCEL / ZONING DISTRICT:	
attorney, or other "development team" personnel. SITE / LOCATION / STREET LOT SIZE / TOTAL PARCEL / ZONING DISTRICT: =================================	
SITE / LOCATION / STREET	eroject or application)
attorney, or other "development team" personnel. SITE / LOCATION / STREET	project or application) Reconsideration
STATEMENT OF PROPOSED WORK OR ACTIVITY: SCOPE OF WORK (pick the actions that best fit your possible Plan)	project or application) Reconsideration Zoning Variance
SITE / LOCATION / STREET	oroject or application) Reconsideration Zoning Variance
SITE / LOCATION / STREET	project or application) Reconsideration Zoning Variance ed plan
SITE / LOCATION / STREET	project or application) Reconsideration Zoning Variance ed plan s