DEVENS ENTERPRISE COMMISSION

DEVENS REGIONAL ENTERPRISE ZONE
PERMIT APPLICATION   LEVEL 2

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ESTIMATED COST OF CONSTRUCTION / IMPROVEMENTS

OWNER _______________________________  APPLICANT ______________________________
ADDRESS _____________________________   ADDRESS _____________________________
TOWN/STATE __________________________  TOWN/STATE _____________________________
PHONE _______________________________   PHONE _______________________________
FAX       _______________________________  FAX       _______________________________

SIGNATURE      SIGNATURE

Type or print name and title

If appropriate, attach a separate sheet with the name(s), address(es), and telephone/fax numbers for the project engineer, attorney, or other "development team" personnel.

SITE / LOCATION / STREET ______________________________________________________
LOT SIZE / TOTAL PARCEL / ZONING DISTRICT: ______________________________________

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STATEMENT OF PROPOSED WORK OR ACTIVITY:

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SCOPE OF WORK (pick the actions that best fit your project or application)

___  Site Plan     ___  Reconsideration
___  Wetlands NOI    ___  Zoning Variance
___  Minor amendment or modification of an approved plan
___  Historic District renovations/addition/alternations
___  Other (Specify) _____________________________________________________________

Explain work to be performed: ____________________________________________________
________________________________________________________________________________

Comments from Notifying Agencies: ________________________________________________