

DEVENS ENTERPRISE COMMISSION

DEC NO. _____

**DEVENS REGIONAL ENTERPRISE ZONE
PERMIT APPLICATION LEVEL 1**

DATE: _____

FEE: _____

ESTIMATED COST OF CONSTRUCTION / IMPROVEMENTS \$ 500.00

OWNER YMC America

APPLICANT MARK DYMENT

ADDRESS 8 Charlestown St.

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TOWN/STATE Devens, MA

TOWN/STATE Devens, MA

PHONE (978) 487-1133

PHONE (978) 487-1133

FAX _____

FAX _____

SIGNATURE _____

Mark L. Dymont
SIGNATURE _____

Type or print name and title

MARK L. DYMENT CEO
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: _____

STATEMENT OF PROPOSED WORK OR ACTIVITY: Placement of three 8'x4' raised gardens to donate to "Growing Places"

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

- Lot Plan - Subdivision
- Site Plan
- Wetlands RDA / NOI / CoC
- Sign Permit
- Minor amendment or modification of an approved plan
- Historic district renovations/addition/alternations
- Other (Specify) _____
- Event Police Detail & Fire Notice *
- One-Day Liquor License
Police Detail & Fire Notice *
- Liquor License Yearly
- Food Service Common Victualer
- Certificate of Occupancy

Explain work to be performed: Construction of three raised gardens

Comments from Notifying Agencies: _____

* Police Detail Required - Call Devens Police 978-772-8800
* Fire Dept Require Notice - Call Devens Fire Dept 978-772-4600