CITY OF BRIDGEWATER BUILDING PERMIT APPLICATION

Date Received:	Permit #	Parcel #

OWNER/APPLICANT

OWNER OR BUSINESS NAME Phone:

Owner Mailing Address:

Owner Email:

APPLICANT NAME (If different than owner)

Applicant Address:

PHONE :

EMAIL:

____A-1 Agricultural District
____R-1 Residential District
____C-1 Commercial District
____I-1 Industrial District

Variance

Conditional Use

TYPE OF IMPROVEMENT

____New Building
____Removal
____Move on/Relocate
____Other/Specify
____Addition/Exterior Change
____Repair/Replace/Remodel
____Building Removal

Use

Type of Construction Required

Sewer

Type of Foundation

CONTRACTOR/DESIGNERS

Contractor

Address

City, State, Zip

Phone #

PROPERTY INFORMATION

Legal Description:

Site Address:

Lot Area:

Lot Frontage:

SITE PLAN

(Include distance from all lot lines) ____Attached

ZONING/BUILDING PERMIT
THIS IS YOUR PERMIT AND RECEIPT WHEN PROPERLY VALIDATED

DESCRIPTION OF WORK AND USE:

Project Costs:

CONDITIONS/LIMITATIONS:

Building Permit Cost

Late Fee

Total Permit Fee

I, the undersigned do hereby affirm the above statements are true and correct and agree to comply with the provisions of the regulations of Bridgewater and the approved plans and specifications accompanying this application. The proposed work is authorized by the owner and authorization to enter the property for inspection purposes is hereby given to authorized representatives of Bridgewater.

_____Owner ____Contractor ____Owners Representative

Signature Date

APPROVAL

Planning Commission Date

City Council Date

CASH

CREDIT CARD

CHECK

_____
Initial By City Finance Officer

Receipt #