



Franklin County Cooperative Inspection Program
 12 Olive Street, Suite 2
 Greenfield, MA, 01301-3318
 (413) 774-3167 Fax: (413) 774-3169 Website: www.fccip.org
 Ashfield Bernardston Buckland Charlemont Conway Erving Gill Hawley
 Heath
 Leverett Leyden Rowe Shelburne Shutesbury Whately

APPLICATION TO CONSTRUCT, REPAIR, RENOVATE OR DEMOLISH A ONE OR TWO FAMILY DWELLING

SECTION 1 - Site Information (Complete Only For New Construction)											
Site Address: Street #	28	Street Name	SEARS ST	Unit No.		Town	Buckland	State	MA	Zip	01338
Acreage/Frontage:											
Map Block Lot	6.1-0-14	Acreage				Frontage					
		Required	Actual	Required	Actual	Required	Actual	Required	Actual	Required	Actual
		20.000	6.70	100							
Front Yard Setback			Side Yard Setback			Rear Yard Setback					
Required			Actual			Required			Actual		
20						10			10		
Water Supply		<input type="radio"/> Public	<input type="radio"/> Private	Flood zone	N	Sewage:	<input type="radio"/> Municipal	<input type="radio"/> Septic	Zone VR LUC 101		
SECTION 2 - Owner/Contractor Information											
** APPLICANT :	<input type="radio"/> OWNER	<input checked="" type="radio"/> CONTRACTOR									
OWNER INFORMATION											
Owner	REIMER TORN SUSAN P	Street #	310	Street Name	W 85TH ST APT 8B	Town	NEW YORK	State	NY	Zip	10024-3807
Owner's Day phone #:	917 543 3040	Cell:		E-mail							
<input checked="" type="checkbox"/> I am the Contractor.											
CONTRACTOR INFORMATION											
Contracting Firm:	Joseph George	Contractor:	Joseph George								
Cont. address: Street # / Street Name	64 Haywood Street				Town	Greenfield	State	Ma	Zip	01301	
Construction Supervisor License #	CSSL99372	Exp. Date	2/11/2021	Hic.#	156686	Exp. Date	7/25/2021				
Contractor Phone:	413 774 3604	Cell:	413 531 1076	E-mail	jgeorgeandson@outlook.com			Fax			
SECTION 3 - Description of Work											
New Construction:											
<input type="checkbox"/> New Single Family Dwelling	<input type="checkbox"/> New Two-Family Dwelling	<input type="checkbox"/> New Barn/Garage/Workshop	<input type="checkbox"/> Sunroom	<input type="checkbox"/> Screened Porch	<input type="checkbox"/> Shed 200 sq.ft. or less						
<input type="checkbox"/> Shed >200sq.ft.	<input type="checkbox"/> Above-ground pool	<input type="checkbox"/> In-ground pool	<input type="checkbox"/> Addition	<input type="checkbox"/> Deck	<input type="checkbox"/> Foundation only						
Renovations:											
<input type="checkbox"/> Roofing	<input type="checkbox"/> Siding	<input type="checkbox"/> Replacement Windows	<input checked="" type="checkbox"/> Insulation/weatherization	<input type="checkbox"/> Deck							
<input type="checkbox"/> Boiler/furnace replacement	<input type="checkbox"/> Solar Installation	<input type="checkbox"/> Demolition	<input type="checkbox"/> Change of Use	<input type="checkbox"/> Other:							
Explanation of work: (Be specific. For example: "Install new bath and kitchen" not "Interior Renovations")											
install vapor barrier on dirt floor in basement											
Estimated Cost:	1767.42	Sq .Ft. Living Space (New)		Sq. Ft. Other Space (New)							
Demolition Debris Disposal Location	<input checked="" type="checkbox"/> No Demolition Debris										
Use Group	R-3	Const. type	V B								
WORKERS' COMPENSATION INSURANCE AFFIDAVIT (M.G.L. c. 152 B 25C(6))											
Workers Compensation Insurance Affidavit must be completed and submitted with this application . Failure to provide this affidavit will result in the denial of the issuance of the permit .											
Signed Affidavit Attached	Yes <input checked="" type="radio"/>	No <input type="radio"/>									
SECTION 4 - SEPTIC SYSTEM LOCATION											
I have located and flagged the components of the septic system and attest that these will not be compromised during construction .											
<input checked="" type="checkbox"/> I do hereby certify under the pains & penalties of perjury that the information provided above is true and correct.											
SECTION 5 - Mandatory for all applications											
<input type="radio"/> Owner <input checked="" type="radio"/> Agent											
OWNER AUTHORIZATION											
I, REIMER TORN SUSAN P, as Owner of the subject property hereby authorize Joseph George to act on my behalf, in all matters related to work authorized by this building permit application . <input checked="" type="checkbox"/>										Date:	
Owner Email <input checked="" type="checkbox"/> Copy of Signed Contract or Owner Authorization to be attached after submitting application											
DECLARATION											
<input checked="" type="checkbox"/> I, Joseph George, hereby declare that the statements and information on the foregoing application are true and accurate, to the best of my knowledge and belief .										Date: 12/6/2020	