

File No. _____

ZONING PERMIT APPLICATION (350.4.4)

Please type in this fillable PDF or print and hand-write all information and return to the [Building Inspector](#) at the [Building Department](#) (212 Main St.) with the \$40 filing fee by check and money order (payable to the City of Northampton) or credit card (in person only).

1. Name of Applicant: _____ Email: _____
Address: _____ Telephone: _____
2. Owner of Property: _____ Telephone: _____
3. Status of Applicant: Owner Contract Purchaser Lessee Other Explain: _____
4. Job Location: _____

Parcel Id: _____ Zoning Map# _____ Parcel# _____ District(s): _____

In Elm Street District _____ In Central Business District _____

(TO BE FILLED IN BY THE BUILDING DEPARTMENT)

5. Existing Use of Structure/Property: _____
6. Description of Proposed Use/Work/Project/Occupation (Used Additional Sheets if necessary): _____

7. Attached Plans: Sketch Plan Site Plan: Engineered/Surveyed Plans
8. Has a Special Permit/Variance/Finding ever been issued for/on the site? No Don't know Yes If Yes,
date issued _____ Was the permit recorded at the Registry of Deeds? No Don't know Yes
If Yes, enter Book _____ Page _____ Document # _____
9. Does the site contain a brook, body of water or wetlands? No Don't Know Yes If yes, has a permit been
or need to be obtained from the Conservation Commission? Needs to be obtained Obtained
Date: _____
10. How many trees will be removed? _____ At 4 ft. above ground level, how many of the removed trees are 5" in
diameter or greater _____

11. Do any signs exist on the property? No Yes If Yes, describe size, type and location: _____

Are there any proposed changes to or additions of signs intended for the property? No Yes If Yes, describe size, type and location: _____

12. Will the construction activity (clearing, grading, excavation or filling) disturb over 1 acre, or is it part of a common plan of development that will disturb over 1 acre? No Yes If Yes, then a Northampton Stormwater Management Permit from the DPW is required.

13. ALL INFORMATION MUST BE COMPLETED, OR PERMIT CAN BE DENIED DUE TO LACK OF INFORMATION

This column reserved for use by the Building Dept. only

	EXISTING		PROPOSED		REQUIRED BY ZONING	
Lot Size						
Frontage						
Setbacks	Front					
	Side	L: R:	L: R:	L: R:	L: R:	
	Rear					
Building Height						
Building Square Footage						
% Open Space: (lot area minus building & paved parking)						
# of Parking Spaces						
# of Loading Docks						
Fill: (volume & location)						
Driveway Grade %						

14. Certification: I hereby certify that the information contained herein is true and accurate to the best of my knowledge.

Date: _____ Applicant's Signature _____

NOTE: Issuance of a zoning permit does not relieve an applicant's burden to comply with all zoning requirements and obtain all required permits from the [Board of Health](#), [Conservation Commission](#), [Historical Commission](#) and [Architectural Boards](#), [Department of Public Works](#) and other applicable permit granting authorities.