

Town of Templeton P.O. Box 620 160 Patriots Rd E. Templeton, MA 01438

Richard D Hanks, CBO Office: 978-894-2770

Building Commissioner Cell: 978-939-3411

Zoning Enforcement Officer Date: _____

APPLICATION FOR USE PERMIT

Applicant Name:	
Applicant Address:	
Telephone:Email:	
Property Owner:	
Address:	
Name of Business:	
Location of Business:	
Zoning District:	
Are there any bodies of water, streams or swamp areas on or abutting this property?()Yes ()No	
Do you have Septic or Town Sewer?	
Are any licenses required? () Yes () No Type & License Number:	
Will additional Parking and/or Employees be required? () Yes () No	
Signature of Applicant:	Date:
Signature of Property Owner:	
Signature of Building Commissioner:	
Signature of Health Agent:	
\$25.00 Fee:	Date:
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