

# Application for Permit to Project On or Over the Public Way



## CITY OF EVERETT, MASSACHUSETTS OFFICE OF THE CITY CLERK

City Hall, Room 10,  
484 Broadway, Everett, MA 02149  
(617) 394-2225 (617) 389-0764 FAX

Hours: Mon; 8:00a-7:30p, Tue-Wed; 8:00a-5:00p, Thur; 8:00a-7:30p, F; Closed

Website: [www.cityofeverett.com](http://www.cityofeverett.com)

The undersigned  
 Owner  Tenant

hereby applies for a permit to:

- Erect
- Replace
- Alter

Structure:

- Illuminated Sign
- Reflectors
- Canopy
- Plain Sign
- Marquee
- Barrier
- Retractable Awning
- Permanent Awning
- Miscellaneous

Detailed plans for the project must accompany this application.

### FOR OFFICIAL USE ONLY:

Application rec'd \_\_\_/\_\_\_/\_\_\_

Approved: \_\_\_/\_\_\_/\_\_\_

Permit issued: \_\_\_/\_\_\_/\_\_\_

Comments/Restrictions:

LOCATION OF PROJECTION:

Description of Work:

### WORK SITE OWNER/TENANT INFORMATION

Individual/Business (DBA) Name:

Everett Business Address:

Phone: ( ) -

Contact Person:

### CONTRACTOR/ INFORMATION

Company Name:

Company Address:

Phone: ( ) -

Contact Person:

I certify that the work to be performed under this application will be done in conformance with the City of Everett Municipal Code and State Building Code.

Signature: \_\_\_\_\_ Date of Application: \_\_\_\_\_  
Contractor or Owner (or Authorized Agent)

### INSPECTIONAL SERVICES DEPARTMENT REPORT

I, \_\_\_\_\_, do hereby state that as of this date the project:

\_\_\_\_\_meets \_\_\_\_\_ does not meet

all of the requirements imposed upon it pursuant to the State Building code and ordinances of the City of Everett.

Signature: \_\_\_\_\_ Date of Application: \_\_\_\_\_  
ISD OFFICIAL