

Town of Westminster Building Department 11 South Street

11 South Street Westminster, MA 01473

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FORM OF INTENT

Please Print Clearly ZONING DISTRICT: ____

| MAPBLOCKLOT PRINT LEGIBLY THE FOLLOWIN | NG: | |
|---|----------------------------------|---------|
| NAME OF BUSINESS: | | |
| NAME OF OWNER: | | |
| LOCATION OF REQUEST: | | |
| MAILING ADDRESS: | | |
| DAYTIME PHONE NUMBER: | | |
| PRINT A COMPLETE EXPLANA | ΓΙΟΝ ABOUT YOUR BUSINESS OR INTE | NTIONS: |
| | | |
| | | |
| | | |
| | | |
| | | |
| PRINT NAME | SIGNATURE | DATE |

The following information is required with all forms submitted:

- 1) Floor plan of how the business or use is going to be set up within the principal structure
- 2) Certified plot plan showing adequate off street parking & setbacks to property lines. Failure to print legibly will delay the determination letter.