



TOWN OF OXFORD

Building & Zoning Department

325 Main Street

Oxford, MA 01540-1727

508-987-6045

Fax 508-987-3934



Building Permit Signature Sheet

Address: _____

Owner: _____

Permit Type:		Paid:	
Trench Permit?	<input type="checkbox"/> Attached	<input type="checkbox"/> I certify a trench permit is not needed.	
Driveway Permit?	<input type="checkbox"/> Attached	<input type="checkbox"/> I certify a driveway permit is not needed.	
Right of Way Permit?	<input type="checkbox"/> Attached	<input type="checkbox"/> I certify a right of way permit is not needed.	
Applicant Signature	_____		
Routing:			
<u>Department</u>	<u>Date</u>	<u>Signature</u>	
Assessors		Signature	
Map ____ Parcel _____		Comments	
Tax Collector		Signature	
Tax Status _____		Comments	
Fire Department		Signature	
Rec'd _____		Comments	
Planning		Signature	
Subdivision Lot # ____ Lot Release? _____		Comments	
Conservation		Signature	
		Comments	
Board of Health		Signature	
		Comments	
Other:		Signature	
		Comments	
Date Accepted:	_____		
Building		Signature	
		Comments	