



Town of Plymouth
Division of Inspectional Services
 11 Lincoln Street
 Plymouth, Massachusetts 02360
 508-747-1620

\$25.00 FEE

APPLICATION FOR APPLYING FOR A BUSINESS

APPLICATION # _____ ZONE: _____

PERMIT # _____ DATE: _____

ADDRESS LOCATION OF BUSINESS: _____

(NEED A STREET NUMBER ASSIGNED BY ENGINEERING DEPARTMENT)

PARCEL #: _____ NAME & TYPE OF BUSINESS: _____

THIS IS A NEW BUSINESS IN PLYMOUTH: () YES () NO

EXPLAIN IN EXACT DETAIL HOW THE BUSINESS WILL BE RUN OUT OF THIS LOCATION:

NUMBER OF EMPLOYEES _____ NUMBER OF OFF STREET PARKING: _____

NAME (please print) _____

MAILING ADDRESS _____

SIGNATURE _____

TOWN _____

ZIP CODE _____

TELEPHONE NUMBER _____

E-MAIL ADDRESS: _____

DO NOT WRITE BELOW THIS LINE

ZONING PERMIT APPROVED: _____

ZONING PERMIT DENIED: _____

DATE ISSUED: _____

BUILDING OFFICIAL SIGNATURE _____

NOTE: AN ON SITE INSPECTION MAY BE REQUIRED BEFORE THE PERMIT IS PROCESSED.