



Town of Reading
16 Lowell Street
Reading, MA 01867

PUBLIC SERVICES DEPARTMENT
Building Division
Mon - Wed - Thu 7:00 AM – 5:30 PM
Tues 7:00 AM – 7:00 PM ~ Fri Closed
Phone 781-942-6613 ~ Fax 781-942-9071
www.readingma.gov

SIGN-OFFS REQUIRED TO OBTAIN A BUILDING PERMIT

Project Location: _____

Project Description: _____

Zoning District: _____ **Name of Business:** _____

Hours of Construction – MUST BE POSTED AT WORKSITE: No person shall perform any construction within the Town except between the following hours (set-up and delivery may take place as early as 6:30 AM):

- 7:00 AM to 8:00 PM on Monday through Friday
- 7:00 AM to 5:00 PM on Saturdays
- NO construction is allowed on Sundays and Legal Holidays (please contact the Town to verify Legal Holidays).

Owner: _____ **Cell Phone:** _____

Address: _____ **Email:** _____

Name of Business: _____ **Business Phone:** _____

Contractor: _____ **Cell Phone:** _____

Address: _____ **Email:** _____

Construction Supervisor: _____ **Cell Phone:** _____

Address: _____ **Email:** _____

Department Approvals Required for Building Permit (*The approval document **must** be attached when applicable)

*Conservation: _____ **Date:** _____

Engineering: _____ **Date:** _____

Fire: _____ **Date:** _____

*Health: _____ **Date:** _____

*Historic District Commission: _____ **Date:** _____

*Planning: _____ **Date:** _____

*Reading Historical Commission: _____ **Date:** _____

RMLD (Electrical): _____ **Date:** _____