

DEVENS ENTERPRISE COMMISSION

33 Andrews Parkway

Devens, MA 01434

Ph: 978-772-8831 x 3338

Fax: 978-772-1529

www.devensec.com



Bldg Permit # _____

Unified Permit # _____

DATE: _____

FEE : ☐ \$10.00

New Tenant/Change of Use OCCUPANCY APPLICATION

(Applies to all organizations relocating or moving into existing buildings in the Devens Regional Enterprise Zone)

OWNER _____

APPLICANT _____

ADDRESS _____

ADDRESS _____

CITY/STATE/ZIP _____

CITY/STATE/ZIP _____

PHONE _____

PHONE _____

EMAIL: _____

EMAIL _____

Type or print name and title

Type or print name and title

Signature

(must be signed by building owner or authorized agent)

Signature

PROPERTY/UNIT ADDRESS: _____ UNIT # _____

DESCRIBE PROPOSED USE/ACTIVITIES OCCURRING WITHIN THE SPACE (attach additional sheets if needed):

OF EMPLOYEES: _____ HOURS OF OPERATION: _____ #OF SHIFTS (list): _____

I CERTIFY THAT THE ABOVE IS AN ACCURATE REPRESENTATION OF THE PROPOSED USES/ACTIVITIES THAT WILL BE TAKING PLACE IN THE LISTED PROPERTY/UNIT.

SIGNATURE

DATE

FOR OFFICE USE ONLY

Gabriel Vellante, Bldg. Commissioner: _____

SIGNATURE

Date

Devens Fire Chief Tim Kelly: _____

SIGNATURE

Date

DEC Director: _____

SIGNATURE

Date

Devens Utilities Dept.: _____

SIGNATURE

Date