



Ritter Memorial Building
960 Massachusetts Avenue
Lunenburg, MA 01462
Phone: 978 582 4146 x420
Fax: 978 582 4353

Town of Lunenburg
Building Department
Form of Intent

Map/Parcel _____

FEE: \$15.00 _____

Please print the following:

Name of Owner of Business: _____

Location of Business: _____

Name of Business: _____

Owner's mailing Address: _____

Daytime Phone Number: _____ **Cell Phone Number:** _____

Briefly explain your Business: _____

Signature: _____ **Date:** _____

In Order for this request to be approved the following information may be required:

1. Floor plan of the business;
2. Plot plan showing off street parking;

All signs require an application filed with the Building Department. The Form of Intent must be filed with Town Clerk before a Business Certificate can be issued.

Approved: _____