



TOWN OF DENNIS
Zoning Compliance Certificate

Project Number _____	By _____
Application Number _____	By _____
Permit Number _____	Fee _____
Health Department _____	By _____
Historic Approval _____	By _____
<input type="checkbox"/> OKH <input type="checkbox"/> SHD	

Town Of Dennis
 Zoning Compliance Certificate
 In accordance with the Town of Dennis Zoning By-Law

Location of Project:

Number	Street	Village
Owners Name: _____ Phone Number: _____		
Mailing Address: City: _____ State: _____ Zip Code: _____		
Assessors Map: _____ Parcel: _____ <input type="checkbox"/> Residential <input type="checkbox"/> New Structure		
Cost of Proposed Work: _____ <input type="checkbox"/> Commercial <input type="checkbox"/> New Use		
Type of Structure: _____ Size: _____		

By accepting this certificate, the property owner certifies under the penalties of perjury that the information provided is true and accurate and that the structure for which this certificate has been issued complies with the Town of Dennis Zoning By-Law and all other applicable regulations.
 Innaccurate information may result in fines and/or revocation of this certificate.

Date Certificate Issued: _____

(Building Official)

The building official shall be notified of any changes in the above information
 This certificate must be posted within the structure for which it has been issued.