



City of Revere

Patrick M. Keefe, Jr.
Mayor

Louis Cavagnaro
Building Commissioner
Office of Municipal Inspections
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Revere, MA 02151
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REQUEST TO WITHDRAW BUILDING PERMIT/S

I am the permit holder, or entity who hired the permit holder, and hereby authorize the city of Revere to withdraw building permit/s# _____ for the property located at street address _____,

Revere, MA 02151.

Initial here if: **Work did not commence. A site inspection is required to verify field conditions before the permit/s can be withdrawn.**

Reason/s for termination: _____ Has work started under this permit/s? Yes _____ NO _____

Please fill out either the Permit Holder OR Property Owner Section below:

Permit Holder- Name-PRINT

Property Owner-Name-PRINT

Street Address

Street Address

City/Town State Zip Code

City/Town State Zip Code

Email: _____

Email: _____

Phone: _____

Phone: _____

Signature

Signature

THE COMMONWEALTH OF MASSACHUSETTS

On this _____ day of _____, 20____ before me, the undersigned notary public, _____ personally appeared, proved to me through satisfactory evidence, which were _____, to be the person whose name is signed on this document and acknowledged to me that he/she signed it voluntarily for its stated purpose.

Notary Public

My Commission Expires