



Town of Tewksbury

BUILDING DEPARTMENT
1009 MAIN STREET
TEWKSBURY, MASSACHUSETTS 01876
(978) 640-4430

PERMIT CANCELLATION REQUEST FORM

Date: _____

PERMIT NUMBER: _____

PROPERTY Address: _____

Original Applicant's Name _____

I am requesting the following action to the permit listed above:

Cancel Permit (if permit has been issued the permit fee is non-refundable)

Reason For Cancellation:

Date: _____

I certify to be: Homeowner PRINT NAME: _____

Contractor PRINT NAME: _____

PRINT NAME:

Homeowner Signature: _____

Contractor Signature: _____
