



PROJECT REGISTRATION FORM for THIRD PARTY GROUND LEASE TENANTS

Project Registration Number _____

Title of Project:

Massport tenant name:

Subtenant name (if applicable):

Date submitted to Massport:

Facility/Location:

Massport Asset Manager for this property?

Scope of Work Description

Total Project Cost Estimate

Schedule Estimate

\$

Start date

End date

Submittal Item	Required?	Description	Date	Notes
Digital Transmission with signed and sealed project plans in electronic format (BIM/CAD and pdf)	Yes, if stamped plans are required for building permit If no building permit is required, submit plans describing the location of the project and scope of work			
Permits – list of all permits to be sought	Copies of all permits must be provided to Massport once obtained			

Project Team	Phone	Email	Address
Architect/Engineer			
General Contractor			
Subtenant Name			

Registration Contact for all correspondence related to this project

Tenant Company name

Individual's name and address

Address of contact

Phone number

Email address