

TOWN OF NORTH EAST

19 N Maple Avenue, PO Box 516, Millerton, NY 12546

P 518-789-3300 x606, F 518-789-3399

buildingdept@townofnortheastny.gov

APPLICATION FOR BUILDING PERMIT

DATE: _____

PERMIT #: _____

IDENTIFICATION OF APPLICANT:

NAME OF OWNER _____ PHONE _____

PARCEL GRID NO. _____ ADDRESS _____

MAILING ADDRESS _____ ZONING DISTRICT _____

APPLICANT'S NAME if other than owner (written consent from owner must accompany this application)

NAME OF APPLICANT _____ PHONE _____

MAILING ADDRESS _____ EMAIL _____

DESCRIBE THE PROPOSED WORK FOR THIS APPLICATION:

- ACCESSORY BUILDING ADDITION ALTERATIONS INSULATING
 DECK/PORCH/SUNROOM POOL/HOT TUB STRUCTURAL REPAIRS
 OTHER _____

DESCRIPTION OF WORK TO BE PERFORMED: _____

SETBACKS: FRONT YARD _____ REAR YARD _____ SIDE YARDS _____

DIMENSIONS _____ X _____ TOTAL SQ. FT. _____ **ESTIMATED COST \$** _____

ATTACHED HERETO AND MADE A PART OF THIS APPLICATION I SUBMIT THE FOLLOWING DOCUMENTS:

- A PROPERTY SURVEY OR A COPY OF THE APPROVED PLOT OF THE AFFECTED PREMISES
 CONSTRUCTION PLANS AND SPECIFICATIONS (2 SETS OF STAMPED ARCHITECTURAL PLANS IF WORK EXCEEDS \$19,000)
 PROOF OF WORKMAN'S COMPENSATION INSURANCE ON FORM #C-105.2 OR U26.3 BY THE CARRIER
 OTHER _____

APPLICATION IS HEREBY MADE TO THE OFFICE OF THE BUILDING INSPECTOR, DEPARTMENT OF PLANNING, ZONING, AND BUILDING PURSUANT TO THE N.Y.S. UNIFORM FIRE PREVENTION AND BUILDING CODE AND THE CODE OF THE TOWN OF NORTH EAST AS ADOPTED BY THE TOWN BOARD. THE APPLICANT AGREES TO COMPLY WITH ALL APPLICABLE LAWS, ORDINANCES, AND REGULATIONS.

SIGNATURE OF APPLICANT _____ DATE _____

SIGNATURE OF OWNER _____ DATE _____

OFFICE USE ONLY

APP FEE \$ _____ PERMIT FEE \$ _____ RECEIPT # _____ DATE _____

BUILDING INSPECTOR _____ DATE _____