

****INSPECTIONS WILL BE DONE ACCORDING TO THE BUILDING INSPECTORS AVAILABILITY****

****ONE WEEK WAITING PERIOD****

TOWN OF PLATTEKILL

**P.O. BOX 45 MODENA NEW YORK 12548
APPLICATION FOR BUILDING PERMIT
883-7331EXT:21**

**BUILDING FEES ARE
NON REFUNDABLE
Base Rate \$50.00 Dollars
for the first \$6,000 of
construction, then \$5.00
per thousand afterward.**

PERMIT# _____ APPROVED _____ DISAPPROVED _____

S/B/L: _____ LOT SIZE _____ DATE _____

LOCATION OF PREMISES _____

OWNER & ADDRESS TELEPHONE# _____ CONTRACTOR _____

IF YOU ARE NOT THE OWNER OF THE PROPERTY HAVE THE PROPERTY

OWNER SIGN HERE: _____

DESCRIPTION OF PROJECT: _____

DIMENSION _____ # OF BATHROOMS _____ # OF BEDROOMS _____

ARCHITECT OR ENGINEER _____ ESTIMATED COST _____

A LICENSED ELECTRICAL INSPECTOR MUST INSPECT ALL ELECTRICAL WORK.

NO WORK CAN BE STARTED WITHOUT THE ISSUANCE OF THE BUILDING PERMIT.

NO BUILDING SHALL BE OCCUPIED OR USED IN WHOLE OR IN PART FOR ANY PURPOSE UNTIL A CERTIFICATE OF OCCUPANCY IS ISSUED.

WHEN REQUESTED BY THE BUILDING DEPARTMENT THIS APPLICATION MUST BE ACCOMPANIED BY ONE COPY OF SURVEYORS MAP AND TWO COMPLETE PLANS, SPECIFICATIONS, AND ALL INFORMATION REQUIRED BY THE ZONING ORDINANCE AND SANITARY CODE OF THE TOWN OF PLATTEKILL.

Application is hereby made to the Building Department for the issuance of a Building Permit pursuant to the New York State Uniform Fire Prevention and Building Code for the construction of buildings, additions or alterations, or the removal or demolition, as hereby described. The applicant agrees to comply with all applicable laws, ordinance and regulations.

I, _____ the applicant do hereby certify that the above statements are true to my knowledge and belief and that any septic installation shall be entirely within the boundaries of the lot.

Date: _____ Signature of Applicant: _____

INITIAL PERMIT EXPIRES IN 12 MONTHS AND RENEWAL EXPIRES IN 6 MONTHS.

MAKE ALL CHECKS PAYABLE TO THE TOWN OF PLATTEKILL

