

APPLICATION FOR A BUILDING AND ZONING PERMIT

Name of Applicant _____
Mailing Address _____
_____ ZIP _____
Telephone: Res. _____ Work: _____

Name of Property Owner: _____
Mailing Address: _____
_____ ZIP _____
Telephone: Res. _____ Work: _____

Name of Contractor: _____
Mailing Address: _____
_____ ZIP _____
Telephone: Res. _____ Work: _____

Location of Property: _____
Tax Map ID: _____ Zone: _____

Description of Work: _____

Estimated Cost of Construction: \$ _____ Total
Gross Square Footage involved: _____ Total

**PERMIT FEE MUST ACCOMPANY THE APPLICATION
EACH PERMIT APPLICATION MUST HAVE A SITE PLAN WITH A SURVEY MAP
AND 2 COMPLETE SETS OF BUILDING PLANS AND SPECIFICATIONS.
COMMERCIAL BUILDING MUST HAVE AN ARCHITECT OR ENGINEER STAMPED SET OF PLANS**

OWNERS SIGNATURE _____ DATE _____

CODE ENFORCEMENT REVIEW CHECKLIST

Date Rec'd. _____ **Information accompanying the application: Site Plan () Survey Map () Stamped set of Blue Prints () Building Plans () Application fee Paid: Yes () No ()**
 Application Information Complete () Date: _____
 Application Information Incomplete () Missing: _____

Watershed Review:
Needs Watershed Review: Yes () No ()
If yes copy received from watershed () **Date copy received** _____
 Is the Building Located in a Flood Plain: Yes () No ()

Highway Review: **N/A ()**
Requires State DOT Permit () **Date Copy received** _____
Requires County Permit () **Date Copy received** _____
Requires Village Permit () **Date Copy received** _____

Insurance Requirement:
Contractor's Insurance on file () **Date copy received** _____
Home owner doing work N/A ()

Needs Planning Board Review: Yes () No ()
For: Site Plan () Special Use Permit () Change of Business use () Subdivision ()
 Application Information Complete () **Date:** _____
 Application Information Incomplete () Missing: _____

 Planning Board: Approved () Denied () **Dated:** _____

Needs Zoning Board Approval: Yes () No ()
Needs Use Variance () Needs Area Variance () Appealed for Zoning Law interpretation ()
 Application Information Complete () **Date:** _____
 Application Information Incomplete () Missing: _____

 Zoning Board of Appeals: Approved () Denied () Upheld CEO Decision () **Dated:** _____

APPLICATION WILL NOT BE PROCESSED UNTIL ALL FEES ARE PAID

Building Permit Fee: \$ _____
Planning Board Application Fee: \$ _____
Zoning Board of Appeals Application Fee: \$ _____
Date Total Fees Are Paid: _____ **Total Fees** \$ _____

Building Permit Approved: () **Date:** _____ Zoning Permit Approved: () **Date:** _____
 Building Permit Denied: () **Date:** _____ Zoning Permit Denied: () **Date:** _____
Reason for Denial or permit put on hold is based on the following:

Code Enforcement Officer _____ **Date:** _____