Town of Catlin Building Department

1448 Chambers Rd Beaver Dams, NY 14812

Permit Date	Permit #	Tax Map #	

APPLICATION FOR A BUILDING PERMIT

Project Address						14812	14830	14845	14864	1487
Property Owner										
Address (if different)										
Applicant (if different)										
*Contractor Telephone#								_		
Email Address *Proof of contractor insurance PROJECT DESCRIPTION	e to be	submit	ted by	y the pro	operty o	owner/	applicar	nt. separ	ate sh	eet)
Circle: New Home Additi										
Windows Roofing Siding										
Description of work to be per	formed	l:								_
Will this project involve the in	nstallat	ion or n	nodifi	ication (Plumb	c Syster ing Syst g Syster	tem '	Y]	N N N
Will this project involve the d	isturba	nce of r	nore t	than one	e acre?			,	Y 1	V
Will this project require Chem ** An electrical inspection will	ung Co	ounty H	lealth	Depart	ment a	oproval d <i>party</i>	? inspecti	ion ag	Y	J
Review this section with the Building			-							
Zoning District	AR	R1	NB	GB						
Flood Plain Area	Yes	No								
> Fire District	Beave	r Dams	Hors	seheads	Millpo	ort To	mpkins C	orners		
> Construction Type	New	Addit	ion	Repair	Alte	ration	200			
Foundation Type	Full	Crawl		Slab	I	Pier/Post	t l			
OST OF CONSTRUCTION	v		Total	Const	ruction	Cost				

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Construction costs for the work described in this application include the cost of all materials and contracted labor costs, exclusive of who performs the work. Estimate of costs may be determined using the Building Valuation Data chart on file in this office.

CONTINUED ON BACK

CERTIFICATION

I HEREBY CERTIFY that I am the owner or authorized agent of the owner, that the information provided herein is accurate to the best of my knowledge, and that the project will be completed as specified. I understand that periodic inspections are required for this project, and that the Code Enforcement Officer, or his designee, is authorized to enter upon the property and make such inspections as prescribed by local and state laws.

It is further agreed that the premises will not be occupied until the required certificate of occupancy has been issued.

Owner/Authorized Agent	Date
FOR OFFICIAL USE ONLY	
Date received	Approved Denied
If denied, state reason	
Signature of Code Enforcement Officer _	
Permit Fee Base Fee \$	
Additional \$	
Total due \$ Make checks payable to the Town of Cat	lin
Inspections Required based on project	> Use this area to show a plot plan of your property.
☐ Footer with rebar installed	
Foundation before backfill	
☐ Framing before insulation	
Plumbing	,
Heating	u.
Electrical rough wire	
Insulation	
Energy code requirements	
Electrical final	
Final walkthrough	•
Other	