**Date: Permit #**

**OFFICE USE**

**Zone:**

**Zoning Board approval: ☐YES ☐NO ☐N/A**

**ZBA Date:**

**TAX ID #**

**Accompanying this application, the following documents will need to be submitted:**

1. **Proof of construction company or contractor general liability insurance coverage.**
2. **Provide a plot plan showing the location of buildings on the premises in relationship to adjoining premises, public streets and areas. Include proposed construction with dimensions, lot lines, setbacks and direction.**
3. **This application must be accompanied by two complete sets of plans, specifications or blueprints, showing proposed construction that describe the nature of the work to be performed. Architectural drawings must be sealed and signed.**

**Location:**

**Click here to enter text.**

**(Street address) (Town) (State) (Zip)**

**Applicant name:** Click here to enter text. **Property owner:** Click here to enter text.

**Construction company if applicable:** Click here to enter text.

**Phone number:** Click here to enter text. **Email:** Click here to enter text.

* **Nature of work:**  [ ] Installation [ ] New building [ ] Addition [ ] Alteration

 [ ] Repair [ ] Demolition [ ] Replacement [ ] Renewal [ ]  Placement

* **Description of work:** Click or tap here to enter text.
* **Estimated cost $Enter amount Permit fee $ Enter amount**

**Contractor, agent, corporate officer, etc. of said owner or owners, are duly authorized to perform or have performed the said work and to make and file this application; that all statements contained in this application are true to the best of their knowledge and belief, and that the work will be performed in the manner set forth in the application and in the plans and specifications filed therewith. Construction will not be permitted until a building permit is issued. No building shall be occupied or used in whole or in part for any purpose until an inspection by the Code Enforcement Officer is complete and a Certificate of Occupancy has been granted.**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **(Building Inspector) (Applicant signature)**