VILLAGE OF SOUTH BLOOMING GROVE BUILDING PERMIT APPLICATION

Accepted payments: check or money order made payable to The Village of South Blooming Grove all payments due with application before review.

Application is hereby made to the Building Department for the issuance of a Building Permit pursuant to the Code of the Village of South Blooming Grove and the New York State Uniform Fire Prevention and Building Code for the construction of Buildings, additions or alterations, or for removal or demolition, as herein described. The applicant agrees to comply with all applicable laws, ordinances and regulations. **PLEASE READ THROUGH THE APPLICATION AND ANSWER QUESTIONS THOROUGHLY.**

Date:				
CHECKLIST: All must be checked prior to submitting permi	it application to the Building De	<u>partment</u>		
 PLAN OR SKETCH IF NECESSARY	PROJECT DESCRIPTION IN	DETAIL		
——————————————————————————————————————	INSURANCE (WAIVER <u>OR</u> C	ERTIFICATE)		
IF YOU HAVE PURCHASED THIS PROPERTY WITHIN LAST 6 MONTHS-PROVIDE DOCUMENTATION				
SITE DATA:				
Section/Block/Lot:				
Street Location:				
PROJECT:	DESCRIPTION:	<u>SIZE:</u>		
New Existing				
——— Accessory Building – with electric Yes or No		X		
Swimming Pool/ Hot Tub (see pool packet)	ABOVE OR IG	X		
Solar Panels (Roof Mount or Ground Mount)	# of Panels S	6q.Ft		
Deck/Porch: Rear Side Front	Size:			
Fence: F <u>ront Rear Side Height</u>				
Roof Replacement (re-roof)				
Woodstove/Pellet Stove/Fireplace				
 Finished Basement – (provide layout sketch)				
Additions – (Provide NYS stamped plans & Detail des	cription)			
 Renovations – (Provide scope of work in detail)				
Electrical – Upgrading, extending or altering wiring s	ystem			
 Removal, Abandonment or Installation of Oil Tanks				
Dwelling or Commercial Building				
Septic/Sewer				
Other:				
Renewal of Permit#:				
Estimated Cost of Project:	_			
Will planned project include Outdoor Lighting? YES or NO (circle one)			
*If the answer is <u>YES</u> your proposed plan or project MUST c	onform with Village Code Chap	ter 235-66.		
APPLICANT INFORMATION:				
Name				

Name:		-
Mailing Address:		-
City/State/Zip Code:		
Phone:	Alt. Phone:	
Email:		

OWNER INFORMATION: (Please make sure you submit the correct MAILING address)

Name:	
Mailing Address:	
City/State/Zip Code:	
Phone: Alt. Phone:	
Email: Zone 2	District:
Property Size/Acreage:	
ENGINEER OR ARCHITECT INFORMATION:	
Name:	
Address:	
Phone:	Email:
CONTRACTOR INFORMATION:	
Company Name:	
Contact Name:	
Address:	
Phone:	Email:
this is provided. <u>DIMENSIONS OF NEW CONSTRUCTION – RESIDENTI</u>	IAL OR COMMERCIAL
Front: Rear:	Depth:
Number of Bedrooms: Numb	-
Garage (attached or detached & # of cars include sq ft):	
First Floor Sq. Ft: Secon	
Т-4-1 О	
1 otal Square Footage:	d Floor Sq. Ft:
Total Square Footage: Estimated Cost of Construction:	
	d Floor Sq. Ft:
Estimated Cost of Construction:	d Floor Sq. Ft:
Estimated Cost of Construction:	d Floor Sq. Ft:
Estimated Cost of Construction:	d Floor Sq. Ft:
Estimated Cost of Construction:	d Floor Sq. Ft:
Estimated Cost of Construction: <u>FOR OFFICE USE ONLY:</u> Total Fee Due: Check or Money Order#: DATE REVIEWED:	d Floor Sq. Ft:
Estimated Cost of Construction:	d Floor Sq. Ft:

<u>*Please call our office 845-782-2600 or check our website</u> www.villageofsouthbloominggrove.com <u>for our complete</u> <u>list of permit requirements</u>