

APPLICATION FOR BUILDING PERMIT

Town of Great Valley, PO Box 427, Great Valley, New York 14741

Address of Proposed Construction _____

Real Property Tax Map Number _____ Date _____

Permit Fee _____

Applicant's Name _____ Signature _____

Address _____

Phone Number _____ e-mail _____

Property Owner's Name _____

Address _____

Contractor _____

Describe Proposed Construction _____ Cost _____

Intended Use and Occupancy _____

Lot Size _____ Zoning District _____

Setbacks: Front _____ Side _____ Side _____ Back _____

Type of Foundation _____ Heat Source _____

Fuel Type _____

Total Square Feet _____ # of Bedrooms _____ # of Bathrooms _____

Garage _____ Porches _____

Attachments

Application must be accompanied by detailed drawings and proof of Workers Compensation Insurance.

Drawings of structures over 1500 square feet must be stamped by a licensed Architect or Design Engineer.