

# APPLICATION FOR BUILDING PERMIT

TOWN OF HUNTER  
CODE ENFORCEMENT OFFICE  
P.O. Box 70  
Tannersville, N.Y. 12485  
(518) 589 – 6150 Ext. 307

PERMIT NO. \_\_\_\_\_  
ISSUED \_\_\_\_\_  
EXPIRES \_\_\_\_\_

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ALL CONSTRUCTION TO BE IN COMPLIANCE WITH NEW YORK STATE  
UNIFORM FIRE PREVENTION AND BUILDING CODE AND ALL RULES AND  
LAWS OF THE TOWN OF HUNTER

**GENERAL INFORMATION:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ TAX MAP NO. \_\_\_\_\_  
OWNERSHIP: PRIVATE: \_\_\_\_\_  
PUBLIC: \_\_\_\_\_  
COMMERCIAL: \_\_\_\_\_

**APPLICANT:**

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
TELEPHONE #: \_\_\_\_\_ CELL # \_\_\_\_\_  
E-MAIL: \_\_\_\_\_

**PROPERTY OWNER:**

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
TELEPHONE #: \_\_\_\_\_ CELL # \_\_\_\_\_

**CONSTRUCTION LOCATION:**

STREET NO. \_\_\_\_\_ STREET NAME: \_\_\_\_\_

**LOT INFORMATION:**

FRONT YARD SETBACK \_\_\_\_\_ REAR YARD SETBACK \_\_\_\_\_  
LEFT SIDE YARD SETBACK \_\_\_\_\_ RIGHT SIDE YARD SETBACK \_\_\_\_\_

**USE:**

EXISTING USE \_\_\_\_\_ PROPOSED USE \_\_\_\_\_  
OCCUPANCY TYPE \_\_\_\_\_ CONSTRUCTION TYPE \_\_\_\_\_

**TYPE OF WORK TO BE DONE:**

NEW \_\_\_\_\_ ADDITION \_\_\_\_\_ ALTERATION \_\_\_\_\_ OTHER \_\_\_\_\_

**PROPOSED BUILDING:**

HEIGHT \_\_\_\_\_ ACTUAL STORIES \_\_\_\_\_ TOTAL SIZE \_\_\_\_\_ SQUARE FEET \_\_\_\_\_  
TYPE OF FRAME \_\_\_\_\_ TYPE OF FOUNDATION \_\_\_\_\_  
TOTAL NUMBER OF ROOMS \_\_\_\_\_ BATHROOMS \_\_\_\_\_ BEDROOMS \_\_\_\_\_  
PRIMARY HEAT SYSTEM \_\_\_\_\_ TYPE OF FUEL \_\_\_\_\_

SPRINKLERS \_\_\_\_\_ NO. OF FIREPLACES \_\_\_\_\_ NO. OF WOODSTOVES \_\_\_\_\_  
CENTRAL AIR CONDITIONING \_\_\_\_\_  
SEPTIC TYPE \_\_\_\_\_ WELL \_\_\_\_\_

GARAGE TYPE:  
UNDER HOUSE \_\_\_\_\_ ATTACHED \_\_\_\_\_ DETACHED \_\_\_\_\_  
NUMBER OF CARS \_\_\_\_\_

ARCHITECT/ENGINEER:  
NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_

TELEPHONE NO: \_\_\_\_\_  
E-MAIL \_\_\_\_\_  
PROFESSIONAL LICENCE NO: \_\_\_\_\_

GENERAL CONTRACTOR:  
NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_

TELEPHONE NO \_\_\_\_\_ CELL NO: \_\_\_\_\_  
E-MAIL \_\_\_\_\_  
WORKER COMPENSATION \_\_\_\_\_  
LIABILITY CARRIER \_\_\_\_\_  
POLICY NO. \_\_\_\_\_

NOTE : CONTRACTORS MUST SHOW PROFF OF INSURANCE IT IS THE LAW.....

NAMES, ADDRESSES AND PHONE NOS. OF ALL SUBCONTRACTORS:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NOTE: GREENE COUNTY LICENSED ELECTRICIAN MUST BE USED FOR ALL  
WORK IN THE TOWN OF HUNTER.....

COST AND FEES:  
ESTIMATED COST OF PROJECT \$ \_\_\_\_\_  
  
Total cost of building permit \$ \_\_\_\_\_

NOTE: ALL FEES TO BE PAID BY CHECK OR MONEY ORDER MADE OUT TO  
TOWN OF HUNTER...

PROVIDED WITH THIS APPLICATION:  
TWO COMPLETE SETS OF PLANS \_\_\_\_\_ PLOT PLAN \_\_\_\_\_ DEP PERMIT \_\_\_\_\_  
ENERGY AUDIT \_\_\_\_\_ ELECTRICAL LAYOUT \_\_\_\_\_ PLUMBING LAYOUT \_\_\_\_\_

**AFFIDAVIT:**

**I SWEAR TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT STATEMENTS CONTAINED IN THIS APPLICATION, TOGETHER WITH THE PLANS AND SPECIFICATIONS SUBMITTED, ARE TRUE AND COMPLETE STATEMENTS OF ALL PROPOSED WORK TO BE DONE ON THE DESCRIBED PREMISES AND THAT ALL PROVISIONS OF THE NEW YORK STATE BUILDING CODE, TOWN OF HUNTER RULES AND LAWS, AND ALL OTHER LAWS PERTAINING TO THE PROPOSED WORK SHALL BE COMPLIED WITH, WHETHER SPECIFIED OR NOT AND THAT SUCH WORK IS AUTHORIZED BY THE OWNER.**

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
(OWNER OR OWNERS AGENT)

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**TO BE COMPLETED BY CODE ENFORCEMENT OFFICER**

**PERMIT GRANTED DATE:** \_\_\_\_\_ **SIGNED** \_\_\_\_\_  
**PERMIT DENIED DATE:** \_\_\_\_\_ **SIGNED** \_\_\_\_\_  
**REASON FOR DENIAL:**

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**PLANNING BOARD SITE PLAN REVIEW APPROVAL:**  
**BY** \_\_\_\_\_ **DATE** \_\_\_\_\_

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**CERTIFICATE OF OCCUPANCY GRANTED**  
**BY** \_\_\_\_\_ **DATE** \_\_\_\_\_

**CERTIFICATE OF COMPLIANCE GRANTED**  
**BY** \_\_\_\_\_ **DATE** \_\_\_\_\_