

# TOWN OF UNION VALE

DIRECTOR OF CODE ENFORCEMENT  
GEORGE A. KOLB JR.



SUPERVISOR  
BETSY MAAS

TOWN COUNCIL  
JOHN WELSH  
STEVE FRAZIER  
KEVIN DURLAND  
KEVIN MCGIVNEY

**BUILDING DEPARTMENT**  
249 DUNCAN ROAD  
LAGRANGEVILLE, NY 12540  
(845) 724-5953  
FAX: (845) 724-3757  
Email: building2@unionvaleny.us

## **Municipal Search Application**

**\*\*\* THE FOLLOWING MUST BE SUBMITTED AT TIME OF APPLICATION \*\*\***

**APPLIC FORM COMPLETED IN FULL     Payment**

**NOTE: THE FOLLOWING WILL BE NEEDED TO PROCESS YOUR APPLICATION**

**GENERAL PROVISIONS:** (APPLICANT TO READ AND SIGN):

1. Application to be filled out in full and legible
2. This office requires on-site inspections for all structured parcels (vacant parcels may or may not be req, to be inspected) please supply all contact information for responsible parties for all site inspections.
3. C/O detector verification will be performed at on-site inspection. Affidavit not required unless otherwise requested by this office.
4. Correspondence and Municipal Search release will be done via email unless otherwise requested.

# APPLICATION FOR MUNICIPAL SEARCH

**\*\*PLEASE NOTE TO ALL APPLICANTS: ALL INFORMATION IS TO BE COMPLETED IN FULL. PLEASE TYPE OR PRINT LEGIBLY OR APPLICATION WILL BE RETURNED\*\***

APPLICATION TYPE:  Residential  Commercial

Title Comp/Agent/Other: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TEL #: \_\_\_\_\_ CELL: \_\_\_\_\_ FAX #: \_\_\_\_\_

**EMAIL (\*REQUIRED\*):** \_\_\_\_\_

**NAME OWNER OF BUILDING/LAND:** \_\_\_\_\_

\* SITE ADDRESS\*: \_\_\_\_\_ Sect./block/lot# \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

TEL #: \_\_\_\_\_ CELL: \_\_\_\_\_ FAX #: \_\_\_\_\_

**EMAIL (\*REQUIRED\*):** \_\_\_\_\_

**NAME OF SITE INSPECTION CONTACT:** \_\_\_\_\_

TEL # \_\_\_\_\_ CEL# \_\_\_\_\_ FAX # \_\_\_\_\_

**EMAIL (\*REQUIRED\*):** \_\_\_\_\_

**DESCRIPTION OF SEARCH INFORMATION REQUESTED:** \*Please provide additional cover letter if needed\*

\_\_\_\_\_  
\_\_\_\_\_

Fee Due:

Vacant parcels: \$ 125.00

Structured Parcels: \$ 250.00

\*Please provide at time of application submittal\*

\_\_\_\_\_  
→ **Signature of Applicant/ Date**

REV: 9/20/16

<p style="text-align: center;"><b>OFFICE USE ONLY</b></p> <p style="text-align: center;"><b>APPROVALS: Zoning/ C.E.O</b></p> <p style="text-align: center;"><input type="radio"/> Approved <input type="radio"/> Denied      DATE: _____</p> <hr/> <p style="text-align: center;"><b>Signature of Code Enforcement Officer</b></p> <hr/> <p>FEE DUE: \$ _____ PAID ON: _____</p>
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