

VILLAGE OF NEWARK
BUILDING PERMIT APPLICATION

1. PERMIT APPLICANT

Name: _____ Cell Phone: _____
Mailing Address: _____ Business/Other Phone: _____
E-mail Address: _____

2. PROPERTY OWNER IF DIFFERENT FROM APPLICANT

Name: _____ Cell Phone: _____
Mailing Address: _____ Business/Other Phone: _____
E-mail Address: _____

3. PROJECT LOCATION:

Street Address: _____
Tax Map number: _____

4. ARCHITECT OR ENGINEER OF RECORD

Name: _____ Business Phone: _____
Mailing Address: _____
New York State License #: _____
E-mail Address: _____

5. PRIME CONTRACTOR/BUILDER

Name: _____ Business Phone: _____
Mailing Address: _____
E-mail Address: _____

6. CONTRACTOR INSURANCE- Please list Village of Newark, 100 East Miller St, Newark, NY as Certificate Holder or Additionally Insured.

.....A. Workman's Compensation secured by Contractor
Yes No N/A

.....B. Disability Benefits Secured by Contractor
.....Yes" No N/A

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7. PROPOSED WORK, CONSTRUCTION, AND OCCUPANCY CLASSIFICATION

A. Nature of Work: _____

B. Occupancy or Use Classification: _____

C. Construction Classification: _____

D. Estimated Cost (Materials & Labor): \$ _____

E. Structure Size: _____
(Length X Width)

Height: _____ Square Footage: _____

8. SITE INFORMATION

A. Flood Plain: Is the site within a flood plain? Yes No

B. Water Supply: Public: on-premise well ?

C. Sewage Disposal System: Public: Private Septic:

D. Energy Information: Heating Source (Primary) _____
(Secondary) _____

9. CERTIFICATION

I HEREBY CERTIFY THAT I HAVE READ THE INSTRUCTIONS AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES COVERING THIS TYPE OF WORK WILL BE COMPLETED WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING THE CONSTRUCTION, THE PERFORMANCE OF CONSTRUCTION OR USE OF A STRUCTURE.

OWNER/AUTHORIZED AGENT: _____ DATE: _____

OFFICE USE ONLY:

10. This application received by _____ DATE: _____

11. Building Permit Fee: _____ Date Paid: _____ Paid by: _____

Check Number: _____ Receipt Number: _____