

**TOWN OF UNION VALE**  
**REQUEST FOR WORK SESSION**  
*Organized by the Building Department*

A NON-REFUNDABLE FEE OF \$500 IS DUE UPON SUBMISSION OF THIS REQUEST

DATE: \_\_\_\_\_

NAME OF APPLICANT: \_\_\_\_\_

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

TELEPHONE (HOME / OFFICE & MOBILE): \_\_\_\_\_

\_\_\_\_\_

EMAIL: \_\_\_\_\_

PROJECT LOCATION: \_\_\_\_\_

TAX PARCEL # \_\_\_\_\_

DESIGN PROFESSIONAL/CONSULTANT NAME: \_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

TELEPHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

DESCRIBE PROJECT: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

*PLEASE ATTACH PLANS, SURVEY, PICTURES, DIAGRAMS WITH DIMENSIONS & MATERIAL SAMPLES, IF AVAILABLE.*

LIST MATERIALS BEING SUBMITTED: \_\_\_\_\_

\_\_\_\_\_

**PLEASE CALL GEORGE KOLB, ZONING ADMINISTRATOR & CHIEF ENFORCEMENT OFFICER, AT 845-724-5953 WITH ANY QUESTIONS.**