

**Marisol Torrens**  
Code Enforcement Officer

**VILLAGE OF LIBERTY**  
**BUILDING DEPARTMENT**



**167 N. MAIN ST**  
**LIBERTY, NY 12754**  
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**ASSEMBLY APPLICATION**  
**AN INSPECTION MUST BE PREFORMED ONCE A YEAR**

Business/ Camp Name: \_\_\_\_\_ SBL: \_\_\_\_\_

Physical address: \_\_\_\_\_

Type of Building:

- Shul     Church     School     Cafeteria     Dining Hall  
 Gym     Other

If other, please explain: \_\_\_\_\_

Business Operators Name: \_\_\_\_\_

Business Operators Phone#: \_\_\_\_\_

Email: \_\_\_\_\_

Business Owner/ Operator Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Caretakers Name: \_\_\_\_\_

Caretakers Phone#: \_\_\_\_\_

Do you plan to install a new or replacement sign in this season?    No    Yes  
Year Round    Seasonal

Enclosed is my check or money order# \_\_\_\_\_ in the amount of \$100.00Permit application fees must be paid by check or money order Village or Liberty.

# Owners Proxy

\_\_\_\_\_ deposits and states that he/she resides at:  
(Owner)

\_\_\_\_\_  
(Location where work is being done)

And that he/she is the owner of the premises described in the attached application for a building permit application and further states that he/she has authorized \_\_\_\_\_ to make said application, secure any necessary permits and approvals, call for inspections, and request a certificate of occupancy upon satisfactory completion of the work described in said application.

Owner's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Email Address: \_\_\_\_\_