TOWN OF AUSTERLITZ NEW YORK BUILDING PERMIT APPLICATION

TAX MAP #	
	Expiration Date:
	Permit #
	Permit fee
1.LOCATION:	
House NoRoad Name	
Subdivision Name & Lot No. (if any)	
2. PROPERTY OWNER	PHONE
	ZIP
3. CONTRACT OR BUILDERCURRENT ADDRESS	PHONE
CITY & STATE	ZIP
4. ZONING DISTRICT TRR -RUAL RESIDENTIAL	. □A- HM AUSTERLITZ HAMLET □S – HM SPENCERTOWN HAMLET
5. EXISTING USE & OCCUPANCY:	
6. INTENDED USE & OCCUPANCY:	
7. NATURE OF WORK: NEW BUILDING ADD	DITION ALTERATION DECK SHED SWIMMING POOL
DEMOLITION OTHER	
8. ADDITIONAL DESCRIPTION	
9. WILL THIS PROPOSAL: (Please answer yes or no t	to each question)
a. Involve new, or alterations to, electrical wiring? _	
b. Involve new, or alterations to, or additional use of	, a sewage disposal system?
c. Require installation, or changes in location, of a dr	riveway?
d. Involve a change in use or occupancy?	_
10. SIZE OF BUILDINGNUMBER OF ST	ORIES DEPTH WIDTH HEIGHT
11. LOT DIMENSIONSWIDTH	DEPTH
12. ESTIMATED COST	\$

REAR YARD FRONT YARD 12. SET BACKS - LEFT YARD _____RIGHT YARD _____REAR YARD ____FRONT YARD ____ 13. Please sketch and locate structure or object within grid showing front, back and side setbacks. 14. APPLICATION IS HEREBY MADE to the Building Department for the issuance of a Building Permit pursuant to the New York State Uniform Fire Prevention and Building Code (Title 9 NYCRR) for the construction of buildings, additions or alterations, or for removal or demolition as herein described. The applicant agrees to comply with all applicable laws, ordinances and regulations, including New York State Energy Code requirements, and the Town of Austerlitz Zoning Ordinance. Signature of Applicant ______ Date_____ Fee Paid \$_____ Date Received____ Check#____ PERMIT DENIED REASON REFERED TO PLANNING BOARD_____

Town of Austerlitz
Erin Reis
Building Department
PO Box 238
Spencertown, NY 12165
518.392.5007 ext. 303

CONTRACTOR LETTER OF AUTHORIZATION

Date			
I,	authorize		
Print, Home Owners Name	Person Obtaining Permit		
To obtain a building permit from the Tov	wn of Austerlitz Building Department	for	
		Type of Work	
On my behalf for the property located at	t	_ SBL#	
	Address of property where Work will be performed		
Signed			
Homeowners Signature			