

# BUILDING PERMIT APPLICATION

## GLOVERSVILLE, NY

- 1. Application MUST be completed in ink.
- 2. Address of property for which permit is being requested:

*\*Note: If the property owner is a corporation, you must attach a list of names and addresses of responsible officer(s).*

- 3. Property Owner: \_\_\_\_\_ Address: \_\_\_\_\_
- 4. Name and Phone number of the person to contact in regard to Application during normal business hours:  
(Mon.- Fri. 8 A.M. - 5 P.M.)

5. Occupancy classification as defined by Building Construction Code (mixed occupancies must be fully described)

6. This application shall be accompanied by plans and specifications, including a plot plan, drawn to scale, showing the Location and size of all existing structures on the site, the nature and character of work to be performed and the materials to be incorporated and all other information necessary to determine compliance with the Building Construction Code. If this information is not provided the application may be disapproved.  
Provide a very brief description of the proposed work:

7. The construction includes (check the appropriate items): demolition, plumbing, electrical, Ventilating or air conditioning heating, or fire alarm equipment

THE OWNER IS HEREBY ADVISED THAT SEPARATE PERMITS MAY BE REQUIRED FOR THE ITEMS NOTED ABOVE.

8. Estimated Cost (Include both labor and materials)

9. AFFIDAVIT: (read before signing Application)

I hereby certify that all information contained on this application is true and that all work performed, for which this permit is requested, shall comply with the Building Construction Code of the City of Gloversville and any other laws, codes, ordinances, rules and regulations regulating the work which may be applicable; the owner and applicant consents to permit any Code Enforcer Official right of entry as prescribed in the Building Construction Code; and if this application is made by other than the owner that the owner has authorized this application to be submitted.

I HAVE READ THE FOREGOING AND UNDERSTAND THAT FALSE STATEMENTS HEREIN ARE PUNISHABLE AS A CLASS A MISDEMEANOR PURSUANT TO SECTION 210.25 OF THE PENAL LAW.

Date: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_

For Building Inspector's Use:		Date Application Received: _____	
APPLICATION:	Approved	Building Inspector:	
-	Disapproved	Date: _____	
COMMENTS:			
Flood Zone	Yes	No	// Historic Zone
			Yes
			No
			// EDZ
			Yes
			No

ENTER BELOW THE PROPERTY OWNERSHIP MAP NUMBER:  
\_\_\_\_\_SECTION\_\_\_\_\_BLOCK\_\_\_\_\_LOT

- White Building Inspector
- Canary Assessor
- Pink City Clerk
- Goldenrod Applicant