INCORPORATED VILLAGE



OF PLANDOME HEIGHTS

37 ORCHARD STREET-MANHASSET, NY 11030 Tel. (516) 627-1136 Fax: (516) 627-1393

www.plandomeheights-ny.gov

info@plandomeheights-ny.gov

APPLICATION FOR BUILDING PERMIT

BP#	Date of application:			
Application is hereby macof (address)	de by	otherw	as (owner or agent for owner) vise known as,	
SECTION	BLOCK		LOT	
As owner or agent for own	ner being duly sworn, deposes and	l says, that (he/	she) is (owner/agent for owner) of	
the property known as (ad	idress)		ner) knowledge and belief, and that the full names and	
	f the aforesaid property, (his/her)			
			EMAIL ADDRESS	
	1110			
ARCHITECT		PHONE		
CONTRACTOR		PHONE		
		PHONE		
the Village of Plandome I relating to the erection or permit the Building Inspe-	Heights, IRC Codes as adapted by alteration of said building in effective actions.	NYState and wet at date of issue of the Incorpora	uance. Additionally, I (we) agree to ated Village of Plandome Heights in	
		Sworn to be	efore me on this day of, 2	
(applicant signature)				
		(Notary	Public, County of)	
No permit will be issued	until this application has been j	properly execu	ited. PERMIT MUST BE RECEIVED BEFORE	
BEGINNING WORK.	-	. •	Denied Date:	
Building Fee of \$				
Dunuing Fee of \$				
			Reason:	
Approved Date:				
approved Dute.				
Signature:			Signature:	
(Building 1	Inspector)		(Building Inspector)	
` •	• ′		(Dulluling inspector)	