

Building Permit No.
 Date Issued.....
 C.O. No.
 Date Issued.....

**OFFICE OF BUILDING DEPARTMENT
 TOWN OF HAVERSTRAW**

1 Rosman Road, Garnerville, NY 10923
 Phone: (845) 942-3710 • FAX: (845) 786-7647
 email: buildingdept@townofhaverstraw.org

Submission Date.....
 Tax Sect. Block..... Lot.....
 Hamlet.....
 Street Zone Dist.....

**APPLICATION FOR
 BUILDING PERMIT**

SEE INSTRUCTION SHEET

Received..... Check No.....
 Amount \$ Date.....
 From:.....
 Signer of Check.....
 Bldg. Code Fee \$.....
 Cert. of Occupancy Fee \$.....
 TOTAL FEE \$.....

1. Application is hereby made to:
- | | | | |
|------------|------------|--------------|-----------|
| () Use | () Alter | () Demolish | () |
| () Erect | () Extend | () Occupy | () |
| () Repair | () Remove | () Convert | () |

Explain:

2. Present use of Structure or Land
- | | |
|--|--|
| <input type="checkbox"/> Single Family | <input type="checkbox"/> Manufactured Home |
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Other..... |

3. Estimated cost of Construction \$.....

4. Contact Name (Print)..... Best Phone.....

5. Owner Name Address (Print)..... Best Phone.....

6. Name of:
- | | |
|---|---------------------|
| ARCHITECT OR ENGINEER..... | N.Y.S. LIC. NO..... |
| BUILDER AND SUPERVISOR OF CONSTRUCTION..... | R.C. LIC. NO..... |
| PLUMBER..... | R.C. LIC. NO..... |
| ELECTRICIAN..... | R.C. LIC. NO..... |

7. If a Special Permit or Variance was granted by the Town Board, Planning Board or Zoning Board, give date of decision and decision number.....

AFFIDAVIT

Town of Haverstraw }
 County of Rockland } S.S.:
 State of New York }

I/We.....

Residing at..... state that I am/We are the owner(s) (lessee, engineer, surveyor, architect, builder, or agent of the owner) of all that certain lot, piece of parcel of land and buildings, situated in the Town of Haverstraw described in the foregoing application: and I/We do hereby make application for a permit to erect, add to, alter, or move, the structure as per statements filled out hereon and to use such structure for purposes stated, and plot showing location is submitted herewith; and I/We do hereby agree that the provisions of the Haverstraw Zoning Code and the NYS Uniform Code will be complied with whether the same are specified herein or not; and I/We declare under the penalties of perjury that the statements contained in the application herein are true to the best of my/our knowledge, information and belief. I/We also declare that the structure or area described in this application will not be occupied or used until I/We have obtained a Certificate of Occupancy. Where application is made by one other than the owner, such party states that he is authorized by the owner to make the within application and that the work is authorized by the owner.

Witness..... Signed.....

If not witnessed by Building Department personnel, Notary signature is required.

Sworn before me this.....

day of20..... Notary Public, State of New York

— Applicant - DO NOT FILL IN —

Checked by Date.....
 Permit granted for:.....

 Date..... BUILDING INSPECTOR



TOWN OF HAVERSTRAW
BUILDING DEPARTMENT

George T. Behn, Jr.
Building Inspector II

Erich J. Desch
Deputy Building Inspector

BUILDING PERMIT APPLICATION INSTRUCTIONS

Top Section:

- a. Submission Date, to be filled in the day the application is submitted.
 - b. Tax Sect-Block-Lot, (we will help you with this if you are not sure)
 - c. Hamlet, They are: Thiells-Garnerville-Pomona-Stony Point
 - d. Street Address
 - e. Zone Dist. (we will help you with this if you are not sure)
1. Explain your project: (see examples) 16' x 20' Rear Yard Wood Deck, Finish Basement (as per plans) Addition to Home (as per plans), Roof Mounted Solar, 18' Round Above Ground, (we will help you with this if you are not sure).
 2. Present Use of Structure Land: Check One
 3. Entire Cost of Project: Labor and Materials
 4. Contact Name and Best Phone Number (print clearly)
 5. Name and address of the property owner (print clearly)
 6. Name of: Architect, Engineer (if required), Builder and/or Construction Supervisor, Plumber, Electrician, (if not applicable mark N/A)
 7. If a Variance was issued give date or number of the decision (if not applicable mark N/A)

Affidavit:

The affidavit must be completed by the Owner or the Owners Agent; it must be notarized by a certified notary or signed and witnessed by Building Department Staff. An application with an Affidavit that is incomplete will not be accepted.