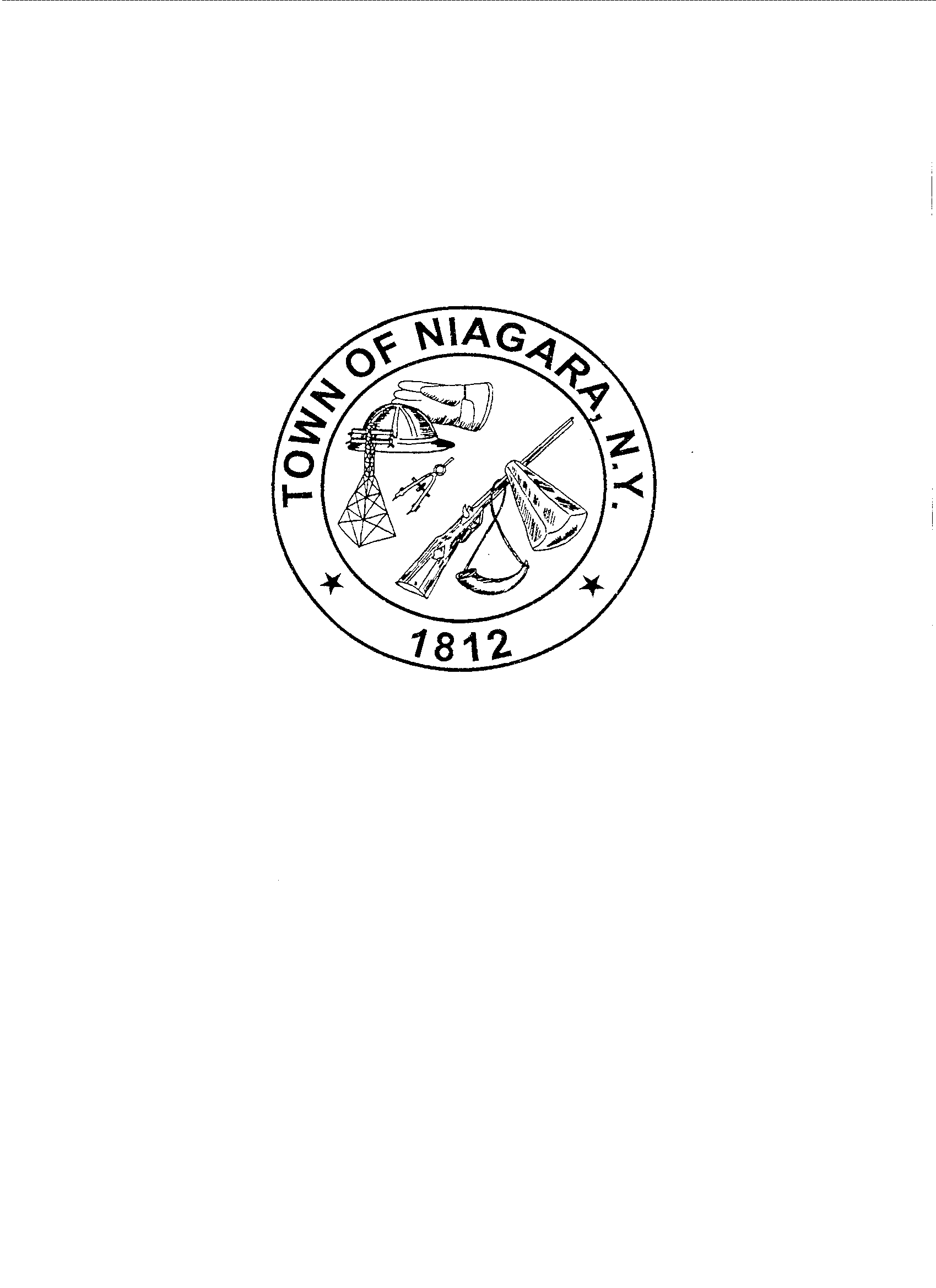
**Application for Building Permit**

Town of Niagara, 7105 Lockport Road, Niagara Falls, NY 14305

**Complete the following information: Incomplete applications will be returned**

1. Name of Applicant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Address of Applicant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Project Owner:
5. Project Address: Tax Map #
6. List all Contractors and addresses (as applicable)
7. GC: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
8. Electrician:
9. Plumber:

**Please Provide the Following**: ⌧ Survey of Property

⌧ Plans & Specifications

⌧ Estimated Cost of Project $ \_\_\_

⌧ Valid Workers Compensation form

**Description of Project**

**ACTION:**  ❑ Erect ❑ Demolish

❑ Alter ❑ Repair

❑ Add ❑ Other­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MATERIAL:** ❑ Frame ❑ Steel

❑ Masonry ❑ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**USE**: ❑ One Family ❑ Apartment ❑ Detached Garage ❑ Fence

❑ Two Family ❑ Commercial ❑ Shed ❑ Pool

❑ Multiple Family ❑ Industrial ❑ Other

**Size of Structure**: **Width**\_\_\_\_\_\_ **Length** \_\_\_\_\_\_\_\_**Height** \_\_\_\_\_\_**No. of Stories** \_\_\_\_ **Square Footage**\_\_\_\_\_

**Note:** **All work within the Town of Niagara right-of-way requires a separate permit (includes driveways)**

Pursuant to Town of Niagara Code Chapter 155, §155-14 A. Inspections, states; Work for which a building permit has been issued under this chapter shall be inspected for approval prior to enclosing or covering any portion thereof, and upon completion of each state of construction, including but not limited to building location, site preparation, excavation, foundation, framing, superstructure, electrical insulation, plumbing, heating and air conditioning. Failure to comply will result in a Stop Work Order.

**All contractors shall be current with the annual Town of Niagara Business Registration. (TNC 125)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Print Name:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Applicant/Owner Signature**: **Date:**

❑ Approved ❑Denied \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Building Inspector/Zoning Officer Signature