Town of Baldwin Code Enforcement

622 Breesport North Chemung Rd. Lowman, NY 14861 Office (607) 215-4422 Cell (607) 857-6442 www.tobaldwin.com

Building Permit Application

1. Project Location:	
2. Owner Name:	
Address:	
City, State, Zip:	<u>Phone</u> :
<u>Tax map</u> #:	<u>Zoned</u> :
3. Contractor Name:	Phone:
•	e AND Disability Insurance required prior to
issuance of permit www.wcb.ny.gov o	
Exemption at https://www.wcb.ny.gov	<u>//icexempt/index.jsp</u>
or septic system, the location of the in	erty: Show any existing and proposed ne location of any existing or proposed well stended work, and the distances between of lines. Contact Code Enforcement at 607-
5. Project description. Estimated proje **Stamped architect prints are require **All commercial projects are required	ed for projects costing over \$20,000.
Define the scope of the proposed work:	k and provide drawings that define the

Personal or business use:	
Is this a corner lot?	
Number of stories:	
Is property located in the flood plain? Yes	
Is this allowed in the District Proposal? Yes $_$	No
CERTIFICATION I hereby certify that I am the (Owner and am authorized to make this application provided is accurate to the best of my knowled completed as specified. I understand that a proceed that the covering this type of work will be complied with the granting of a permit does not presume to provisions of any other or local law regulating construction. I authorize the Code Enforcement upon the property to make inspections as presented by law.	cation. I assert that the information edge and the project will be provision of laws and ordinances with whether specified herein or not. In give authority to violate or cancel ground construction or performance of each Officer, or his designee, to enter escribed in applicable local and state
Signed: Dat	te: