TOWN OF SWEDEN APPLICATION FOR PERMIT B--BUILDINGS & STRUCTURES

PLEASE PRINT APPLICATION (Use Ink Pen) DATE:

TAX ACCOUNT #	PERMIT #		
Residential ====================================	Business/Commercial \Box	Industrial	
1. Applicant:			
Address:			
2. Builder:		Phone:	
Address:		e-mail:	
3. Architect/Engineer:		Phone:	
Address:			
4. Property LocationStreet Address a Owners Name and Address			
5. Description of project, including ov	erall dimensions and intended	use:	
6. Estimated cost of construction when			
7. Plumbing must be under the superv			
are required. PLUMBING PERMIT w			
8. A Plot Plan is herewith submitted an	1 11	n. Yes □	
9. State or County Highway Permits of			•
10. In the event that construction, alter			
change such approved construction, al	teration, or relocation, without	turther application and receip	ot of
additional permit.	41 6 41 14 61	T . 11 91.	
11. Building permits expire 12 months		•	•
extended upon application by the pe			
Building Inspector. Extension will o	only be granted upon approv	al by the Building Inspector	of a written
request.			
I DO HEREBY CERTIFY that, the staten knowledge and belief.	nents contained in this application	n are true and correct according t	o my best
DATE:SIGNAT	URE:		
APPLICATION APPROVED/DENIE	D·	Date:	
	Building Inspec		
FEES:	ADDITION	AL CHARGES (if applicable)	
Plan Review	Working with	nout a permit	
Building Permit	Stop Work O	-	
Garage/Barn/Shed	•	ension for Expired Permit	
Fireplace/Wood Stove/Generator		tion/Re-inspection	
Porch/Breezeway/Deck	1	1	
Certificate of Occupancy/Compliance			
Plumbing Permit			
SUB TOTAL:			
Sewer Connection Permit Fee			
Parks & Recreation Fee	+		
GRAND TOTAL:			
	1		