TOWN OF NORTH EAST

OFFICE OF THE BUILDING INSPECTOR
PO Box 516, Millerton, New York 12450
Phone 518-789-3300 x 607 Fax: 518-789-3399

APPLICATION FOR MECHANICAL PERMIT

IDENTIFICATION OF APPLICANT:

NAME OF OWNER_____ PHONE_____

PARCEL GRID NO._____ 911 ADDRESS_____

MAILING ADDRESS_____ ZONING DISTRICT_____

APPLICANT'S NAME if other than owner (written consent must be received from owner and accompany this application)

NAME OF APPLICANT_____ PHONE_____

MAILING ADDRESS_____

DESCRIBE THE PROPOSED WORK FOR THIS APPLICATION:

☐ WOOD STOVES ☐ OIL TANK INSTALL ☐ ELEVATORS ☐ PLUMBING SYSTEMS

☐ AUXILLIARY GENERATOR ☐ HVAC SYSTEMS ☐ SOLAR PANELS ☐ ELECTRICAL UPGRADE

☐ BOILER/FURNACE ☐ FIREPLACES ☐ OTHER_____

DESCRIPTION OF WORK TO BE PERFORMED:_____

_____

SETBACKS: FRONT_____ REAR_____ SIDE_____

ESTIMATED COST $_____

ATTACHED HERETO & MADE A PART OF THIS APPLICATION I SUBMIT THE FOLLOWING DOCUMENTS:

☐ A PROPERTY SURVEY OR A COPY OF THE APPROVED PLOT OF THE AFFECTED PREMISES (If Applicable)

☐ MANUFACTURER'S SPECIFICATIONS & CONSTRUCTION PLANS

☐ REQUIRED LICENSES

☐ PROOF OF WORKMAN'S COMPENSATION INSURANCE ON FORM #C-105.2 OR U26.3 BY THE CARRIER

APPLICATION IS HEREBY MADE TO THE OFFICE OF THE BUILDING INSPECTOR, DEPARTMENT OF PLANNING, ZONING, AND BUILDING PURSUANT TO THE N.Y.S. UNIFORM FIRE PREVENTION & BUILDING CODE & THE CODE OF THE TOWN OF NORTH EAST AS ADOPTED BY THE TOWN BOARD. THE APPLICANT AGREES TO COMPLY WITH ALL APPLICABLE LAWS, ORDINANCES & REGULATIONS.

SIGNATURE OF APPLICANT_____ DATE _____

(Must be signed in office)

SIGNATURE OF OWNER_____ DATE_____

OFFICE USE ONLY

ADMIN. FEE $_____ MECH. PERMIT FEE $_____ RECEIPT NO._____ DATE_____

MECHANICAL PERMIT NO._____ DATE_____ ZB/PB APPROVAL_____