

## TOWN OF LOCKPORT Single Family Home & Small Project Application

ALL REQUIRED BUILDING PLANS SHALL HAVE A REGISTERED ENGINEERED/ARCHITECTURAL WET SEAL -SIGNATURE - DATE FROM N.Y.S.

PERMIT:	DATE:	P	ROJECT COST:
PERMIT SITE LOCATION:			TAX MAP#:
PROJECT DESCRIPTION: ERECT	ALTER	☐ ADD ☐	DEMO OTHER
TYPE / USE:			
INSURANCE - Liability Exp. Date:		INSURANCE - Wk. Comp. Date:	
BUILDER: SELF CONTRACTOR If CONTRACTOR complete below:			
OWNER NAME:		CONTRACTOR NAME:	
ADDRESS:		ADDRESS:	
CITY/STATE/ZIP:		CITY/STATE/ZIP:	
PHONE #:		PHONE #:	
SUB CONTRACTOR NAMES			
FOUNDATION:		PLUMBING:	
ERECTION:		ELECTRIC:	
ARCH / ENG:		INSULATION:	
<u>SPECIFICS</u>	SURVEY / PLOT	PLAN	<u>OTHER</u>
TYPE/CONST: (Wood, Metal,	SET BACK (F):		# of BEDROOMS:
Brick, Etc.)	SET BACK (S):		# of BATHS:
DEPTH:	SET BACK (S):		TOTAL # OF ROOMS:
LENGTH:	○ SEWER	○ SEPTIC	FUEL TYPE:
HEIGHT:			
SQ. FEET:  RANCH RAISED RANCH 2 STORY SPLIT LEVEL  FEE CALCULATION (Office use only)			
AIR CONDITIONING: O YES O NO			
# OF FIREPLACES:			
APPLICANT'S SIGNATURE:			
			TOTAL FEE: