Village of Chester Application for Building Permit

47 Main Street, Chester, NY 10918 Telephone: 845-469-2388 / Fax: 845-469-5999

Permit #_____

Email – <u>building@villageofchesterny.com</u>

Date	Application ID #
	on Block Lot
2. Applicant / Primary Contact:Address	Phone Number
Applicant is (check one or more): ☐ Owner	☐ Agent ☐ Engineer/Architect □ Other - specify:
3. Property Owner's Name:	Phone Number
	Phone Number
Address Insurance Certificates Provided: ☐ General Lia ** Insurance certificates must be submitted with this applic reviewed or issued unless this is provided.	
5. NYS Licensed Professional who drew the plans	s being submitted in support of this application:
Name:	☐ RA ☐ PE License #
Address:	Phone Number:
Describe previous and/or proposed use of facility Square footage of proposed work area:	ew Building □ Addition □ Alteration □ Change of Use y:
7. Applicant Signature:	Date:
	ce with Municipal Ordinances, Rules / Regulations, the New York nying drawings / specifications and such conditions as may be note
No building shall be used in whole or in part unt Building Inspector or Code Enforcement Officer	il a Certificate of Occupancy shall have been granted by the
Remarks	
Application Approved	, Code Enforcement Officer
Application Fee \$ Permit l	Fee \$ Total Due: \$