



**VILLAGE OF SAG HARBOR
BUILDING DEPARTMENT**
55 MAIN ST., PO BOX 660
SAG HARBOR, N.Y. 11963
631-725-0224
631-725-4852 FAX
BUILDINGDEPT@SAGHARBOR.NY.GOV

RECEIVED	_____
PERMIT No.	_____
PERMIT FEE	_____
FEE PAID	_____
FEE DUE	_____
DATE ISSUED	____/____/____

BUILDING PERMIT APPLICATION

*** ALL QUESTIONS MUST BE ANSWERED ***

THIS IS A(N): NEW PERMIT AMENDMENT TO AN EXISTING PERMIT No. _____

TAX MAP NUMBER: _____ - _____ - _____ - _____ PROPERTY LOCATION: _____
DISTRICT SECTION BLOCK LOT LEGAL STREET ADDRESS AND NUMBER

PROPERTY OWNER: _____ APPLICANT: _____
 MAILING ADDRESS: _____ MAILING ADDRESS: _____

 PHONE: _____ PHONE: _____
 EMAIL _____

APPLICANT IS: OWNER LESSEE AGENT ARCHITECT BUILDER OTHER: _____

IF OWNER OR APPLICANT IS A CORPORATION or LLC, FURNISH NAMES OF MANAGING OFFICERS or MEMBERS:

CORPORATE/LLC PROPERTY OWNER NAME	CORPORATE/LLC APPLICANT NAME
NAME: _____	NAME: _____
ADDRESS: _____	ADDRESS: _____

CONTRACTOR RESPONSIBLE FOR CONSTRUCTION:

NAME: _____ CONTRACTORS LICENSE NO: _____
 PHONE: _____ ISSUED BY: SOUTHAMPTON EAST HAMPTON SUFFOLK
 E-MAIL: _____

THIS PERMIT IS TO: BUILD A NEW STRUCTURE MAKE CHANGES TO AN EXISTING STRUCTURE
 THIS PERMIT IS FOR: PROPOSED WORK WORK ALREADY PERFORMED
 WHAT IS THE ESTIMATED COST OF CONSTRUCTION? \$ _____
 CURRENT No. OF BEDROOMS: _____ PROPOSED No. OF BEDROOMS: _____
 CURRENT No. OF FULL BATHROOMS: _____ PROPOSED No. OF FULL BATHROOMS: _____
 CURRENT No. OF HALF BATHROOMS: _____ PROPOSED No. OF HALF BATHROOMS: _____
 IS THIS PARCEL IN THE HISTORIC DISTRICT OR DESIGNATED AS A LANDMARK? YES NO
 FLOOD ZONE: X V AE N/A
 ZONING DISTRICT: R-20 VB WF OD RM
 IS THIS PARCEL IN THE TIDAL OVERLAY DISTRICT? YES NO

Briefly describe the scope of the project: _____

STATE OF NEW YORK } ss.:
 COUNTY OF _____ }

_____ being duly sworn deposes and says that he/she is the owner or agent for the owner and is duly authorized to make and file this application; that all statements contained in this application are true to the best of his/her knowledge and belief, and that the work will be performed in the manner set forth in the application and in the plans and specifications filed therewith.

SIGNATURE OF APPLICANT

Sworn to before me this _____ day of _____ 20____

 Notary Public _____ County

APPROVED: _____
 BUILDING INSPECTOR