

Town of Armenia Application for Building Permit

Application is hereby made for a permit to construct, erect, re-model, or move a building or business structure, in conformity with the Ordinance of the Town of Armenia on the property designated below and in the manner described herein:

- 1) Applicant Name: _____
Address of Site Needing permit: _____
Name of Sub-division or lot number: _____
- 2) Mailing Address & Phone number if different than above: _____

- 3) Legal description of site: _____
- 4) Name of Builder, Contractor, Architect or Engineer: _____
- 5) Building to be occupied as: _____
- 6) Size of Structure: Length: _____ Number of Stories: _____
Width: _____ Square Feet: _____
- 7) Type of Structure, conversion, enlargement or alteration. Ex. Mobile home, pre-built home, addition, new bathroom, porch, deck, etc.: _____ Est. cost \$ _____
- 8) Copy of Sanitation Permit (if needed): _____
- 9) Proposed manner of providing adequate safe supply of water: _____

- 10) **Complete Reverse Side-** With a description of the proposed site for the structure with specific detail showing the size of the lot or parcel involved, the location of the proposed structure, location of existing public roads and other access routed to the property, including the location of driveways.

Certificate of Applicant: I hereby certify that the above application is a true and correct statement of the work to be done. That any changes there from shall before being made be submitted to the Building Inspector and/or Town Board for approval and record and that the building and/or lot shall conform to **Town Ordinance 17 & 25** and all **Zoning** and **State Building Codes** on said application.

Date: _____ Signed: _____
(Applicant-Owner-Agent-Contractor)

Permit No. _____ is hereby issued to the above described work on the condition that the same be done in accordance with the description and conditions as stated on said application.

Permit Issue Date: _____ Signed: _____
(Zoning Administrator)

Fee received for Permit \$ _____ **PERMIT IS GOOD FOR ONE YEAR FROM ISSUE DATE.**

Note: The Building Permit must be displayed in plain sight near the road.

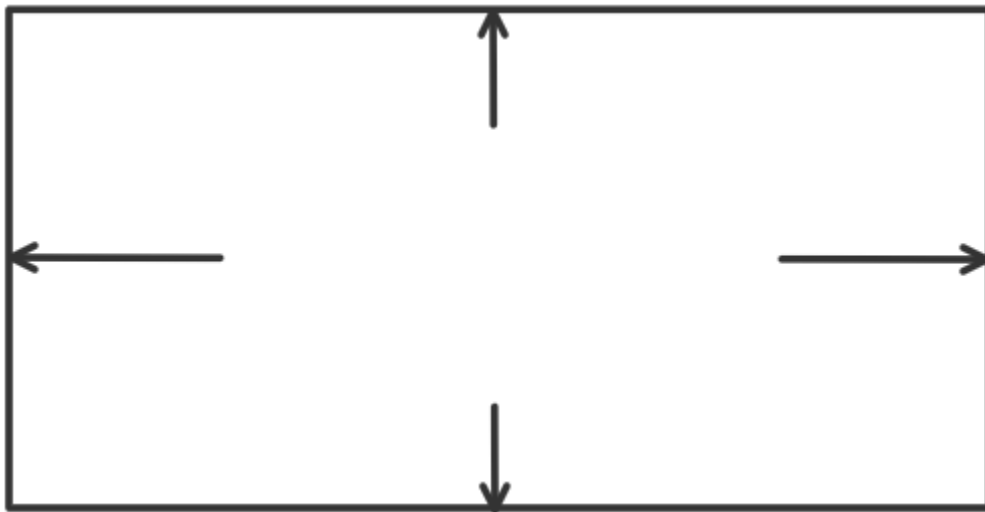
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Planned Lot Layout

Fill in dimensions on this plan, locate any accessory buildings, indicate which direction is North. Show locations of sanitary installations with distance in feet from wells, streams, lakes, and property lines. Please provide the name of Lake, Stream, or watercourse if applicable. Changes in plans or specifications shall not be made without approval from the Zoning Committee and/or the Zoning Administrator.

Please Label Map as Follows: All existing building (EB), accessory buildings (AB), Septic Tank (ST), Absorption Field (AF), New Well (W), and Existing Well (EW). Please indicate which direction is North.

Back lot line or Normal high water mark.



Distance to Right of Way Line: _____

Distance to Center Line of Highway: _____

Class of Highway/Road: _____

Zoning Administrator Use Only:

Inspection Record: _____

Inspected By: _____ Date: _____

If shore-line permit required. Permit number: _____