

**Town of Stickney**  
**Building Permit Application**  
 Each building site must have a separate site plan

*Applicant to complete numbered spaces only.*

1. Job Address	<b>Owner</b>	<b>Job Address</b>
2. Legal Description of Construction Site		
3. Owner <span style="float: right;">Mailing Address <span style="margin-left: 100px;">Zip</span> <span style="margin-left: 100px;">Phone</span></span>		
4. Contractor <span style="float: right;">Mailing Address <span style="margin-left: 100px;">Zip</span> <span style="margin-left: 100px;">Phone</span></span>		
5. Architect or Designer <span style="float: right;">Mailing Address <span style="margin-left: 100px;">Zip</span> <span style="margin-left: 100px;">Phone</span></span>		
6. Type and Use of Building		
7. Class of Work (Check One): <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Remove		
8. Describe Work:   		
9. Valuation of Work: \$ <span style="margin-left: 100px;">Mobile/Manufactured Home Tax Affidavit</span> <span style="margin-left: 100px;">Y</span> <span style="margin-left: 100px;">N</span>		

*For Official Use Only-*

Special Conditions: \_\_\_\_\_

Set Backs: Front 25', Side(interior lots) 5', Side(corner lots) 25', Rear 5' or 20' with vehicle access(garage)

Application Accepted By:	Site Plans Checked By:	Approved for Issuance By:	<b>Permit Fee</b>	<b>Check #</b>
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<p style="text-align: center;"><b>NOTICE</b></p> <p>THIS PERMIT WILL EXPIRE IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN ONE HUNDRED EIGHTY DAYS OR CONSTRUCTION IS NOT SUBSTANTIALLY COMPLETED WITHIN TWO YEARS OF ISSUANCE. I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF THE TOWN OF STICKNEY ZONING ORDINANCE OR ANY OTHER FEDERAL, STATE, OR LOCAL LAW REGULATING CONSTRUCTION ACTIVITIES OR THE USE OF ANY PROPERTY.</p>	Type of Construction	Sewer/Water Certification of Service
	Total Square Feet	Number of Stories
	Zoning District	Number of Accessory Buildings
	Number of Dwelling Units	Property/Parcel/Lot Size
	<b>For County Officials Use Only</b>	
When Property Validated (in this space), this is your permit		

Signature of Contractor or Authorized Agent	Date	The above application is hereby approved <b>YES</b> <b>NO</b>
Signature of Owner	Date	<b>Zoning Administrator or Authorized Representative</b> <span style="float: right;"><b>Date</b></span>

BY THIS SIGNATURE, THE ZONING ADMINISTRATOR IS AUTHORIZED TO ENTER UPON THE PROPERTY DESCRIBED FOR THE PURPOSE OF INSPECTION

**Chairman of the Town Board**

Approved	<b>YES</b>	<b>NO</b>	Date
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