APPLICATION FOR A VILLAGE OF ALMOND PERMIT AND CERTIFICATE OF COMPLIANCE

White – Zoning Administrator
Yellow – Deputy Zoning Administrator
Pink - Applicant

Village _____

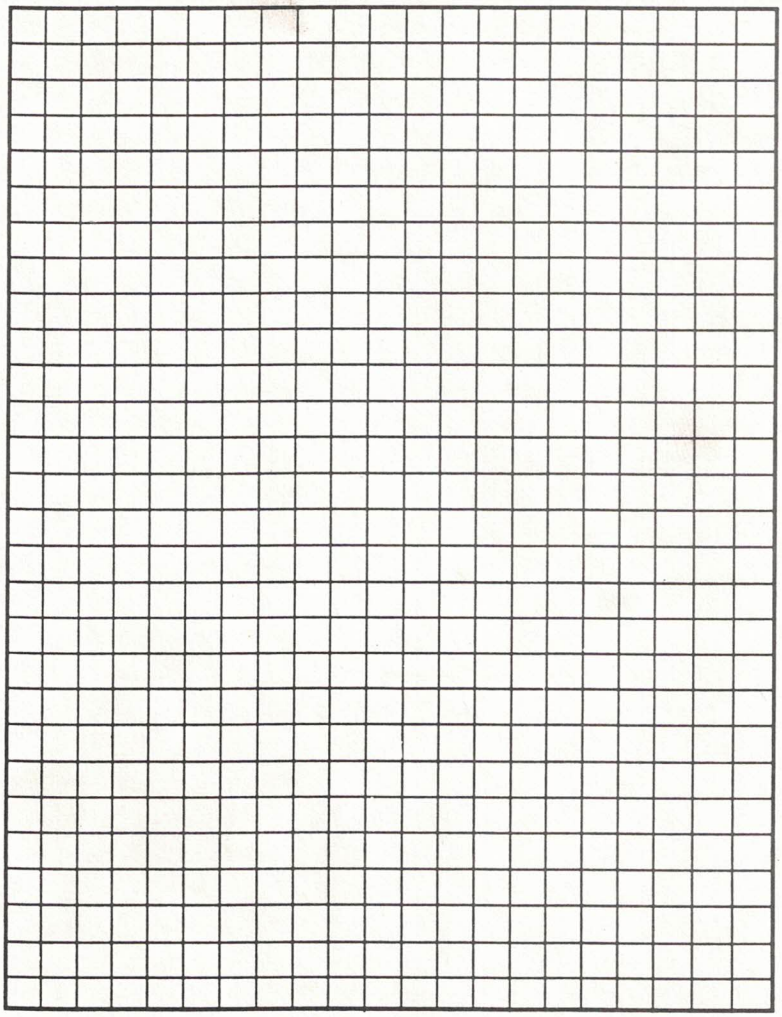
Parcel No. _____

Owner _____ Date _____

Address _____ Telephone Number _____

City _____ State _____ Zip _____ Sanitary Permit Number _____

SKETCH PLAN:



SETBACKS:

Highway _____ ft. to centerline
Highway _____ ft. to right-of-way
Side Yard _____ ft.
Side Yard _____ ft.
Rear Yard _____ ft.
Water (river, lake, etc.) _____ ft.
Wetland _____ ft.
Septic Tank _____ ft.
Drainfield/Dry Well _____ ft.

Purpose/Dimension/Square Ftg. of Construction:

_____
_____
_____

Market Value _____
Starting Date _____
Completion Date _____

CONTRACTORS:

Building _____
Electric _____
Septic System _____
Well _____

FOR OFFICE USE:

Permit No. _____

Date Issued _____ Date Denied _____

Reason(s) for Denial _____
Section Number

_____
Deputy Zoning Administrator's Signature

PROPERTY OWNER'S STATEMENT

The undersigned property owner hereby applies for a ZONING PERMIT and CERTIFICATE OF COMPLIANCE for the alteration described and located as shown herein and agrees that all work shall be done in accordance with the requirements of the joint COUNTY-TOWN ZONING ORDINANCE and the statements of this application and agrees that the premises will not be used until the (Deputy) Zoning Administrator, after notification, certifies such completed alteration is in compliance with the requirements of the joint COUNTY-TOWN ZONING ORDINANCE and the statements of this application.

_____
Signature of Property Owner or Agent Date