No:

ZONING PERMIT APPLICATION

GLOVERSVILLE, NY

 Application MUST be co Check Type of Permit Be Fence Si Address of property for v 	eing Requested ign La	and Usage ested				
4. Property Owner	Ad	ldress				
5. Name and Phone number (Mon Fri. 8 A.M 5 P.		in regard to Applic	ation during norma	al business ho	ours:	
6. Property is located in a		Zoning District	Occupancy Class	ification		
7. Draw a plot plan showing	g lot dimensions: building	and street location	s and proposed con	struction:		
8. Provide a brief description paving, etc.)	on of proposed constructio	n (i.e. fence height	, sign dimensions ar	nd location wi	ith respect	to grade,
9. Estimated Cost (include 10. AFFIDAVIT: (read before I hereby certify that all in permit is requested, shall coordinances, rules and regulary Code Enforcer Official by other than the owner that I HAVE READ THE FORE A CLASS A MISDEMEAN	ore signing Application) information contained on to omply with the Building Clations regulating the work right of entry as prescribe at the owner has authorize EGOING AND UNDERST	onstruction Code of which may be applied in the Building Old this application that FALS	of the City of Glover olicable; the owner a Construction Code; to be submitted. E STATEMENTS F	rsville and an and applicant and if this ap	y other law t consents to pplication is	vs, codes, to permit s made
Date:						
For Building Inspector's Use: APPLICATION Approved			ication Received:_ Inspector:			
COMMENTS:	Disapproved	Date:				
Flood Zone Yes	No // Historic Zone	e Yes No	// EDZ	Yes	No	
White Buildin Canary Assesse	ng Inspector or	ENTER BELO	W THE PROPERYSECTION	OWNERSH BLOO		UMBER _LOT

Pink

City Clerk

Goldenrod Applicant