Print Form

Receipt No. ..... Date .....
Bd. Appeals No..... Date .....
Health Dept. No.....
Flood Zone ..... Elev. Req.....
Storm Water Management Permit ..... ☐
T.O.S Home Improvement Contractor's License No.....
Plumbing Contractor's Registration No.....
Electrical Contractor's Registration No.....

SCTM # 0900- ...../ ...../ .....
Sect Block Lot
C.O. No. ..... School District .....
(When Applicable)

Zoning District .....
NewCommercial Certificate of Compliance..... ☐
New Appl ..... ☐ Renewal ☐ No. .....
Bedrooms in Basement ..... ☐ Proposed ☐ Existing
Permit Fee $ .....

APPLICATION FOR BUILDING PERMIT

TOWN OF SOUTHAMPTON
116 HAMPTON ROAD, SOUTHAMPTON, NEW YORK 11968
(631) 287-5700

INSTRUCTIONS:

A. This application must be completed in every respect, typed or printed in ink.
B. Work covered by this application may not be started before permit is issued.
C. All permits will be mailed to the person identified as contractor or agent unless other wise specified by owner.
D. All certified of occupancy of certified of compliance will be mailed to the owner.

Owner of property and proposed structure .....
Full Name Phone Number

.....
Mailing Address Zip Code

Name of contractor or agent responsible for construction .....
Full Name Phone Number

.....
Mailing Address Zip Code

Location of Property .....
Street No. Hamlets Distance from nearest intersection

Name, address & phone number of person who prepared the plans for this application .....

State whether applicant is: Owner ☐ **Lessee** ☐ **Agent** ☐ **Architect** ☐ **Builder** ☐ **Other** ☐

If owner or applicant is a corporation, give name, title and address of two officers

Property Corporate Officers if owner is Corporation

Name .....
Address .....
City ..... **State** ..... **Zip** .....
Phone Number .....

Property Corporate Officers if Agent is Corporation

Name .....
Address .....
City ..... **State** ..... **Zip** .....
Phone Number .....

State existing use of premises .....
Description of Proposed Construction .....
.....
.....
.....

Area of proposed construction:
Main floor. .....sq.ft. **2nd-floor**.....sq.ft. **Mezzanine floor**.....sq.ft. **Finished Basement est. cost** .....
Garage-1st floor.....sq.ft. **2nd-floor**.....sq.ft. **Accessory Building 1st-floor**.....sq.ft. **2nd-floor**.....sq.ft.
Alteration est. cost.....sq.ft. **Demolition est. cost**.....sq.ft. **Swim Pool est. cost**.....sq.ft. **Tennis ct.**.....
Porch.....sq.ft. **Deck**.....sq.ft. **Fence est. cost**..... **Plumbing Fixtures Count** .....
Other .....

Dose this property front on any State or County highway?.....

APPLICATION IS HEREBY MADE: to the Department of Land Management, Building and Zoning Division, for issuance of a Building Permit pursuant to the New York State Uniform Fire Prevention and Building Code, Southampton Town Zoning Ordinance, Chapter 330, and all amendments thereto, for the construction of buildings, additions or alteration, or for removal or demolition, or for any change of use as herein described. The applicant agrees to comply with all application laws, ordinances, and regulations.

(County of Suffolk) SS
(State of New York)

_____ (applicant print name) being duly sworn deposes and says that he/she is the ◯ **Owner** ◯ **Authorized Agent** of the premises described in the within application, and states the applicant is authorized to make this application. This applicant consents to permit the building inspector and any officer of employee of the Building and Zoning Division to enter upon the subject premises without a search warrant for the purpose of inspecting the building and work.

Sworn to before me this

_____ Signature of Applicant

_____Day of _____ of 20 ____

_____

_____ County
Notary Public

Seal:

FOR DEPARTMENT USE ONLY:
Permit to Read: _____