APPLICATION FOR PERMIT AMENDMENT OR RENEWAL

Office	Use Only
PERMIT NO.	

CODE ENFORCEMENT OFFICE

6 SOUTH PARK STREET CLYDE, NY 14433

Office U	Jse Only
PERMIT FEE:	

(315) 923-3971 (Village of Clyde)	(315) 923-7259 (Town of Galen)
Name of Applicant:	
Applicant's Address:	
Applicant's Phone #:	
I, the above named Applicant, hereby apply for (c	ircle one): amendment renewal
of Building Permit No, to p	(address) lescribed below:
BRIEF DESCRIPTION OF ORIGINAL PROJEC	.1:
IF THERE ARE ANY CHANGES TO THE ORIODESCRIBE BELOW (use attachment if necessary	· · · · · · · · · · · · · · · · · · ·
TOTAL COST OFADDITIONAL WORK (if any): § Total cost includes all structural, electrical, plumbing, mechanical, interior finish and normal	(See Note Below) If site preparation. If no cost is given, the cost will be estimated for you.
I hereby affirm that I have full legal capacity to authorize the filing of this application and the best of my knowledge. The undersigned invites representatives of the Village of Clyde and the subject property during the period of construction. The undersigned understands that the	/ or Town of Galen to make reasonable inspections and investigation of
APPLICANT SIGNATURE: X	DATE:
OFFICE USE ONL	Υ
APPROVED BY:	APPROVAL DATE:

COPIES TO: Applicant Assessor Code Enforcement Officer File