

Robbe Baer codes@townofjayny.gov

P.O. Box 730, 11 School Lane Au Sable Forks, NY 12912

		DPW Approval:	
		Permit #:	
		Date:	
1: Applicant's Name, Add	lress & Contact Informati	on (phone #, email):	
Applicant is (check one):	Owner Contracto	rEngineer/Archit	ect
	ss & Contact Information	-	
	ldress & Contact Informa		
	rformance of work (check one		
-	actor's Liability Insurance (A form) or Waiver of Workers'		
4: Project Location:			
Street Address:			
Tax Map # :			
5: Water Supply (check o	one): Municipal Wate	r New Well	Existing Well
Wastewater (check one	e): Municipal Sewer _	Existing Septic Sys	tem
_	New Septic System (Eng	ineered plans are requi	red by NYS)
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6: Nature of Work (c)	heck ALL that	apply):		
New Building	Addition	Repair/Alteration	Change of Use	
Describe previous ar	nd/or proposed	d use:		
Describe work to be	completed:			
7: Cost of new constr	uction or addi	ition:		
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8: Will a driveway be constructed or altered (check one): YES NO	
If yes, please complete Town of Jay "Right of Way" Permit form	me to aplied y to e or
9: Is the project site under Adirondack Park Agency jurisdiction (check one):YES	
Is the project site within a flood plain (check one): YES NO	
Is the project site in a designated wet land (check one): YES NO	
10: NYS Licensed Professional who has drawn submitted plans for this application (che one): Registered Architect (RA) Engineer (PE)	ck
Name, Address & Contact Information (phone #, email):	
	<u> </u>
License Number:	
**The above named design professional must complete and attach a plan review summary sheet.**	nary  mary  mary  came to emplied rity to use or
11. Building Details:	
Please complete page 4	
12: Has work covered by this application already been started or completed (check one): YES NO	
13: Applicant Certification:	
I hereby certify that I have read the instructions and examined this application and know the same to be true and correct. All provisions of laws and ordinances covering 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 any other state or local law regulating construction or land use or the performance of construction.	ed
Signature: Date:	
DPW Approval: Permit #: Date:	



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Type of Construct:					
New House _	Addition	Alter	ation/remodel	Rep	air
Mobile Home _	Shed	Swir	nming Pool	Dec	k
Fuel Burning _	Chimney	Gara	age/carport		
Basement Type:					
Slab on grade _	Crawl space	Full	basement	Pieı	c
Combination of t	he above (please gi	ive approxin	nate dimensior	ıs)	
Heating/Air Condit	tioning Equipme	ent:			
Oil fired	Propane fired		_ Electric	Ge	othermal
Central air	Other (descrik	oe)			
General Informati	on (answer all tl	nat apply):			
Number of bedro	ooms Number	of sinks	Num]	ber of toilet	rs.
Number of batht					
Number of encl	osed porches	Numb	er of open porc	ches	
Is there a generator:	:YESNO				
If yes: Size in kild	owatts F	uel source	Manua	ıl start OR _	Auto start
Are there solar pane	els: YES N	0			
If yes: Size of arm	ray (SF)	Num	ber of panels		
KW per p	anelTotal KW	I for the arra	ay		
Exterior Surface (	check all that ap	ply):			
Clapboard siding	Shingle	e	_ Board & batte	en	Stucco
Vinyl Al	uminum(	Other			
DPW Approval:	Dorn	nit #·		Da	ıto.