

# Town of Ogden

## BUILDING PERMIT APPLICATION

Owner of Property \_\_\_\_\_ Phone \_\_\_\_\_

Property Address \_\_\_\_\_

Name of Contact person \_\_\_\_\_ Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Lot # \_\_\_\_\_ Subdivision \_\_\_\_\_

Contractor \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

\*\*\*Contractor MUST provide updated Liability and Workers Comp Insurance\*\*\*

Residential \_\_\_\_\_ Commercial \_\_\_\_\_ Industrial \_\_\_\_\_

Type of Construction: New Building \_\_\_\_\_ Addition \_\_\_\_\_ Alteration \_\_\_\_\_

Demolition \_\_\_\_\_ Deck \_\_\_\_\_ Pool \_\_\_\_\_

Shed \_\_\_\_\_ Fence \_\_\_\_\_ Other \_\_\_\_\_

Residential Truss ID/Pre-engineered wood \_\_\_\_\_

Commercial Truss ID \_\_\_\_\_ (Building Type: I, II, III, IV, V Truss Type: F, R, FR)

Description of work (dimension, square footage, location of work, etc.) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Estimated Cost of Construction \$ \_\_\_\_\_

Date of Application \_\_\_\_\_ Called for pick-up \_\_\_\_\_

269 Ogden Center Road, Spencerport, NY 14559 •(585)617-6195•Fax (585)352-4590 ww.ogdenny.com

Updated 1/2019