For Office Use Only

Date Received_____By_____

Paid Yes No Amount_____

Approved / Disapproved By_____#_____

Village of Hilton

59 Henry St. Hilton, NY 14468
Telephone: (585)392-4144 Fax: (585)392-5620
Website: hiltonny.org

BUILDING PERMIT APPLICATION

New Structure_____Addition_____Remodel_____Demolition_____ Fence_____

Pool_____Deck_____Shed_____Stove/Fireplace_____Sign_____

Other_____Estimated cost of Construction_____

PROPERTY ADDRESS_____

Tax map parcel #_____Dimensions of Project_____X_____ Square Footage_____

Description of work_____

_____

Contractor Name & Address:_____

Contractor's certificates of insurance are attached*: Liability_____Workers Compensation_____

*If certificates are not submitted, Applicant **must** complete a form indicating no insurance is required._____

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Instructions

1. This application must be clearly printed and submitted to the Village Office for review by the Building Inspector.
2. A site plan must be provided to show lot dimensions and the location of the proposed structure on the lot.
3. This application must be accompanied by three complete sets of plans. If the proposal is for a new residential, business or industrial structure, the plans must have been prepared and/or approved by an Architect or Professional Engineer licensed to practice in New York State.
4. Upon issuance of a permit, it shall be conspicuously posted on the property and shall remain posted until construction is completed and approved.
5. Applicants/developers must furnish certificates of liability and worker's compensation insurance or complete a form indicating no insurance is required.
6. Any fees incurred through professional services provided by the Village of Hilton's engineer, attorney or planning consultant and legal publications, shall be paid by the applicant/developer prior to the issuing of a certificate of occupancy or compliance.
7. It is the responsibility of the applicant/developer to call for required inspection, but during the construction period the property is subject to inspection at any time during normal working hours by Village Code Enforcement Officials or their designated agents. Please allow 24 hours for normal inspections.

The applicant herby affirms that the above information is accurate and complete, to the best of their knowledge and they are the title owner of the property or have been authorized by the title owner to make this application.	I herby certify that I am the title owner of the property identified in the above application and that the applicant named is authorized to make the application described herein.
_____ Applicant Signature	_____ Owner Signature
_____ Applicant Name Printed	_____ Owner Name Printed
_____ Mailing Address	_____ Mailing Address
_____ / _____ Phone# Fax#	_____ / _____ Phone# Fax#
_____ / _____ Cell# E-Mail address	_____ / _____ Cell# E-Mail address