

**INCORPORATED VILLAGE OF BELLE TERRE**

1 Cliff Road, Belle Terre, New York 11777 (631) 928-0020

**Applicant Leave Blank**

Permit No	_____
Permit Issued	_____
Permit Expires	_____
Permit & CO Fee	_____
Decision	_____

**APPLICATION FOR BUILDING PERMIT**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

SECTION \_\_\_\_\_ BLOCK \_\_\_\_\_ LOT \_\_\_\_\_

DATE \_\_\_\_\_

**THIS APPLICATION MUST BE APPROVED AND PERMIT ISSUED BEFORE BEGINNING WORK**

The undersigned hereby applies for a permit to do the following work which will be done in accordance with the description, plans, building and zoning specifications submitted, and such special conditions as may be indicated on the permit, and pursuant to the Workmen's Compensation laws of this State of New York and all other State and Federal laws and regulations.

Location of Property: \_\_\_\_\_

Contractor of the person responsible for the supervision of the work:

_____	_____	_____
Name	Address	Phone

Total Estimated Contract Costs:	Building _____	Total Actual Contract Costs:	Building _____
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**NATURE OF PROPOSED WORK**

**BRIEF DESCRIPTION OF INTENDED USE OF STRUCTURE**

- \_\_\_ Construction of New Building
- \_\_\_ Addition to a Building
- \_\_\_ Alteration to a Building
- \_\_\_ Demolition of a Building
- \_\_\_ Installation of Mechanical Facilities\*, Describe:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_ Other Work, Describe: \_\_\_\_\_

\*Mechanical facilities include plumbing, electrical, ventilating, heating and air conditioning equipment.

**PLEASE READ THE FOLLOWING STATEMENTS AND SIGN:**

\_\_\_\_\_ Hereby certify that I have received, read and understand all of the enclosed instructions regarding the Building Permit Application for the Village of Belle Terre and have filled this application out to the best of my ability.

I am fully informed that it is a violation of the Ordinances of the Village of Belle Terre to occupy the dwelling to be erected on this property until a Certificate of Occupancy shall have been issued by the Village Building Inspector.

\_\_\_\_\_  
Applicants Signature

**AFFIDAVIT**

Incorporated Village of Belle Terre  
Town of Brookhaven, County of Suffolk, State of New York

I swear to the best of my knowledge and belief that the statements contained in this application, together with the plans and specifications submitted, are a true and complete statement of all proposed work to be done on the described premises and that all provisions of the BUILDING CODE and ZONING ORDINANCE, and all other laws pertaining to the proposed work shall be complied with, whether specified or not, and that such work is authorized by the owner.

Signature: \_\_\_\_\_  
(Owner, Owner's Agent, Architect, Contractor)

Sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
(Notary Public, Suffolk County, N.Y.)