

Town of Northumberland, Saratoga County, New York  
P.O. Box 128, 17 Catherine Street  
Gansevoort, NY 12831  
Ph: 518-792-9179 Fax: 518-792-9203  
BZA@Townofnorthumberland.org

**APPLICATION FOR BUILDING AND ZONING PERMIT**

Permit Number: \_\_\_\_\_ Date Submitted: \_\_\_\_\_ Zoning: \_\_\_\_\_ SBL#: \_\_\_\_\_

APPLICATION IS HEREBY MADE to the Building Department for the issuance of a building and zoning permit pursuant to the New York State Fire Prevention and Building Code, for the construction of buildings, additions or alterations, or for the removal or demolition as herein described. The Applicant agrees to comply with all applicable laws, ordinances, or regulations governing building activities in the town of Northumberland and will also allow all inspectors to enter the premises for inspections. The Applicant also understands that under no circumstances shall personal belongings or furnishings be brought into any new house or additions, without first obtaining a Certificate of Occupancy or written permission from the Building Department.

**APPLICANT TO COMPLETE**

Contractor Name \_\_\_\_\_ Property Owner's Name \_\_\_\_\_  
Address \_\_\_\_\_ Address \_\_\_\_\_  
City \_\_\_\_\_, \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_, \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ or \_\_\_\_\_ Phone \_\_\_\_\_ or \_\_\_\_\_  
Project Description: \_\_\_\_\_ # of Bedrooms \_\_\_\_\_ # of Bathrooms \_\_\_\_\_  
*Driveway Entrance Permit* Water Installer's Name: \_\_\_\_\_  
*Name of Road:* \_\_\_\_\_ Sewer/Septic Size \_\_\_\_\_  
Estimated Cost of Project \$ \_\_\_\_\_ # of Fireplaces \_\_\_\_\_ Area Square Ft. \_\_\_\_\_  
Lot Size \_\_\_\_\_ Acreage \_\_\_\_\_ Garage \_\_\_\_\_ # of Stalls \_\_\_\_\_  
Email: \_\_\_\_\_

**Note:** THIS BUILDING PERMIT IS EFFECTIVE FOR ONE (1) YEAR FROM DATE OF ISSUANCE. ALL INSPECTIONS REQUIRE A MINIMUM OF 24 - HOUR NOTICE PRIOR TO THE INSPECTION DATE. ALL ELECTRICAL WORK MUST BE INSPECTED BY A NEW YORK STATE CERTIFIED INSPECTION AGENCY AND A CERTIFICATE OF APPROVAL OBTAINED FROM THEM.

\_\_\_\_\_  
**SIGNATURE OF OWNER, APPLICANT OR AGENT**

**OFFICE USE ONLY**

TOTAL FEE DUE: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ = \$ \_\_\_\_\_  
(Total Amount Collected)

Check # \_\_\_\_\_ / \_\_\_\_\_ Date \_\_\_\_\_ Collected By \_\_\_\_\_  
(Initial)

The application of \_\_\_\_\_ date \_\_\_\_\_ is hereby approved (disapproved) and permission is granted (refused) for the construction, reconstruction or alteration of a building and/or accessory structure as set forth above.

Comments/Conditions and/or Refusal of Permit:  
\_\_\_\_\_  
\_\_\_\_\_

Dated: \_\_\_\_\_  
\_\_\_\_\_  
Authorized Signature