TOWN OF SMITHTOWN

BASE FEE - $200
Fee for additional sq.ft. _____
Fee for addition Plumbing _____
Total Fee _____

THE BUILDING DEPARTMENT

APPLICATION FOR AMENDED BUILDING PERMIT

YOU MUST SUBMIT THREE (3) CERTIFIED COPIES OF AMENDED PLANS BY A NYS ARCHITECT OR ENGINEER REFLECTING ALL CHANGES " REVISIONS MUST BE CLOUDED ON DRAWINGS"

Building Permit No. ……. Amendment Fee $……. Receipt No. ……

Zoning District …….Section ……..Block…….Lot(s)……

Existing Zone Use ……

Description of Permitted Work ……..

…….

Project Name……

Project Location/Address ……

……

Daytime Phone No. …….Fax No. ……..

Owner(s) Name……..…

Owner(s) Address ……..…

…….

Daytime Phone No. …….Fax No. ……..

Explain in detail the purpose for amending existing permit ……

……..

……

……

Sworn to before me this:

_____Day of _____ 20_____

_____
(Notary Public, New York)

Signature _____
(Owner, Owner's Agent,, NYS Licensed Design Professional)

_____
(Print Name)

Amendment/Plan
*approved by*_____

on _____