

TOWN OF SWEDEN
APPLICATION FOR PERMIT B--BUILDINGS & STRUCTURES

PLEASE PRINT APPLICATION (Use Ink Pen)

DATE: _____

TAX ACCOUNT # _____ PERMIT # _____
 Residential ☐ Business/Commercial ☐ Industrial ☐

1. Applicant: _____ Phone: _____
 Address: _____ e-mail: _____
 2. Builder: _____ Phone: _____
 Address: _____ e-mail: _____
 3. Architect/Engineer: _____ Phone: _____
 Address: _____ e-mail: _____
 4. Property Location--Street Address and Lot # _____
 Owners Name and Address _____
 5. Description of project, including overall dimensions and intended use: _____

6. Estimated cost of construction when completed: \$ _____
 7. PLUMBING PERMITS, if applicable, are required and will be obtained by _____
 8. A Plot Plan is herewith submitted and made part of this application. Yes ☐
 9. State or County Highway Permits on file? Yes ☐
 10. In the event that construction, alteration, or a relocation is permitted, applicant agrees not to expand or change such approved construction, alteration, or relocation, without further application and receipt of additional permit.
 11. **Building permits expire 12 months from the date of issuance. Expired building permits may be extended upon application by the permit holder, payment of the permit extension fee, and approval of the Building Inspector. Extension will only be granted upon approval by the Building Inspector of a written request.**

I DO HEREBY CERTIFY that, the statements contained in this application are true and correct according to my best knowledge and belief.

DATE: _____ SIGNATURE: _____

APPLICATION APPROVED/DENIED: _____ Date: _____
 Building Inspector

FEES:		ADDITIONAL CHARGES (if applicable)	
Plan Review		Working without a permit	
Building Permit		Stop Work Order	
Garage/Barn/Shed		6 Month Extension for Expired Permit	
Fireplace/Wood Stove/Generator		Failed Inspection/Re-inspection	
Porch/Breezeway/Deck			
Certificate of Occupancy/Compliance			
Plumbing Permit			
SUB TOTAL:			
Sewer Connection Permit Fee			
Parks & Recreation Fee			
GRAND TOTAL:			