



VILLAGE OF MILLBROOK  
APPLICATION FOR BUILDING PERMIT  
BUILDING INSPECTOR: KENNETH McLAUGHLIN

PHONE/TEXT: 845-240-2118 FAX:845-677-3972 OFFICE HOURS: 5-7 PM AT VILLAGE HALL  
ADDRESS: VILLAGE OF MILLBROOK PO BOX 349 35 MERRITT AVE MILLBROOK NY 12545

**PLEASE USE UPDATED FEE SCHEDULE**

**IDENTIFICATION OF APPLICANT**

NAME OF OWNER \_\_\_\_\_ PHONE NO.: \_\_\_\_\_

PARCEL GRID NO. \_\_\_\_\_ PHYSICAL ADDRESS: \_\_\_\_\_

MAIL ADDRESS \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

APPLICANT'S NAME: \_\_\_\_\_ PHONE NO.: \_\_\_\_\_

E-Mail (for e-copy of Building Permit): \_\_\_\_\_  
(if applicant is not the owner of the property, owner of property MUST sign at the bottom of application)

**DESCRIBE THE PROPOSED WORK FOR THIS APPLICATION: (PLEASE CHECK) ALTER  USE  ERECT**

- ACCESSORY BUILDING  ADDITION  ALTERATIONS  INSULATING  MECHANICAL PERMIT
- DECK/PORCH/SUNROOM  POOL/HOT TUB  STRUCTURAL REPAIRS  ELECTRICAL PERMIT

**DESCRIPTION OF WORK TO BE PERFORMED AND CONTRACTOR'S NAME AND PHONE NUMBER:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DIMENSIONS: \_\_\_\_\_ X \_\_\_\_\_ TOTAL SQ. FT. \_\_\_\_\_ ESTIMATED COST\* \$ \_\_\_\_\_

**ATTACH THE FOLLOWING DOCUMENTS AS PART OF THIS APPLICATION**

(Please check appropriate boxes)

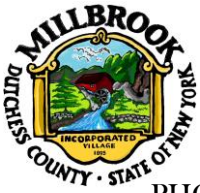
- A PROPERTY SURVEY OR COPY OF THE APPROVED PLOT OF THE AFFECTED PREMISES
- CONSTRUCTION PLANS & SPECIFICATIONS (2 SETS IF ARCHITECTURAL PLANS)
- ZONING WORKSHEET
- PROOF OF WORKMAN'S COMPENSATION INSURANCE ON FORM #C-105.2 OR U26.3 BY THE CARRIER

PLEASE CHECK IF YOU OR OWNER IS AWARE OF ANY EASEMENT/S. IF YES, PLEASE PROVIDE A COPY OF AFORESAID EASEMENT/S. *NOT PROVIDING A COPY OF THE EASEMENT/S MAY RESULT IN A DELAY IN ISSUANCE OF YOUR BUILDING PERMIT AND/OR CERTIFICATE OF OCCUPANCY.*

*APPLICATION IS HEREBY MADE TO THE OFFICE OF THE BUILDING INSPECTOR, DEPARTMENT OF PLANNING, ZONING AND BUILDING PURSUANT TO THE N.Y.S. UNIFORM FIRE PREVENTION & BUILDING CODE & THE CODE OF THE VILLAGE OF MILLBROOK AS ADOPTED BY THE VILLAGE BOARD. THE APPLICANT AGREES TO COMPLY WITH ALL APPLICABLE LAWS, ORDINANCES & REGULATIONS.*

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE OF OWNER \_\_\_\_\_ DATE \_\_\_\_\_



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**PLEASE BE SURE TO CONTACT THE BUILDING INSPECTOR WHEN YOUR PROJECT HAS BEEN COMPLETED FOR YOUR FINAL INSPECTION. AFTER YOUR FINAL INSPECTION, YOU WILL BE ISSUED A CERTIFICATE OF OCCUPANCY.**

\*\*\*\*\*OFFICE USE ONLY\*\*\*\*\*

BLDG. PERMIT FEES PAID \$ \_\_\_\_\_ RECEIPT NO. \_\_\_\_\_ DATE: \_\_\_\_\_  
BUILDING PERMIT NO.: \_\_\_\_\_ DATE: \_\_\_\_\_

DENIAL:

REASONS FOR DENIAL: \_\_\_\_\_

REFERRED TO: \_\_\_ PLANNING BOARD \_\_\_ ZONING BOARD OF APPEALS

DATE: \_\_\_\_\_

BUILDING INSPECTOR'S INITIALS: \_\_\_\_\_

- Zoning Code:  General Business (GB)  Residential (R)  Residential Low Density (RLD)  
 Residential Multi Family (RMF)  Bennett College District (BCD)  Residential Transitional (RT)  
 Rural (RU)

Building Inspector Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_