

ZONING PERMIT APPLICATION

Codes/ Zoning Officer
(315)534-2232 cell

Town of Newport
P.O. Box 519, Newport NY 13416

Phillip D Green
Newportzoningcodes@ntcnet.com

Zoning Permit Application Instructions:

1. All Permits must be applied for and the permit application approved before work is started.
2. No work shall be started on the assumption that the permit will be approved
3. Provide completed application with 2 copies of a site plan to the Codes/Zoning Officer. Site Plan must show area of proposed work with distances to wells, ponds, lakes, streams, dwellings and property lines.
4. Please contact Codes/Zoning Officer with any questions regarding Zoning Permits.

Zoning Permit Application Applicant

Name

Address

Telephone and Fax

City & Zip Code

Email Address

Owner (if different)

Name

Address

Telephone and Fax

City & Zip Code

Nature of Project: _____

Property/Project Information

Street Address _____

Tax Map # _____

Zoning District _____

Applicants Signature

Date

(Office Use Only) Receipt of Filing

Application Number: _____

Fee (If Variance Required): _____

Date Issued: _____

Date Returned: _____

Complete Incomplete

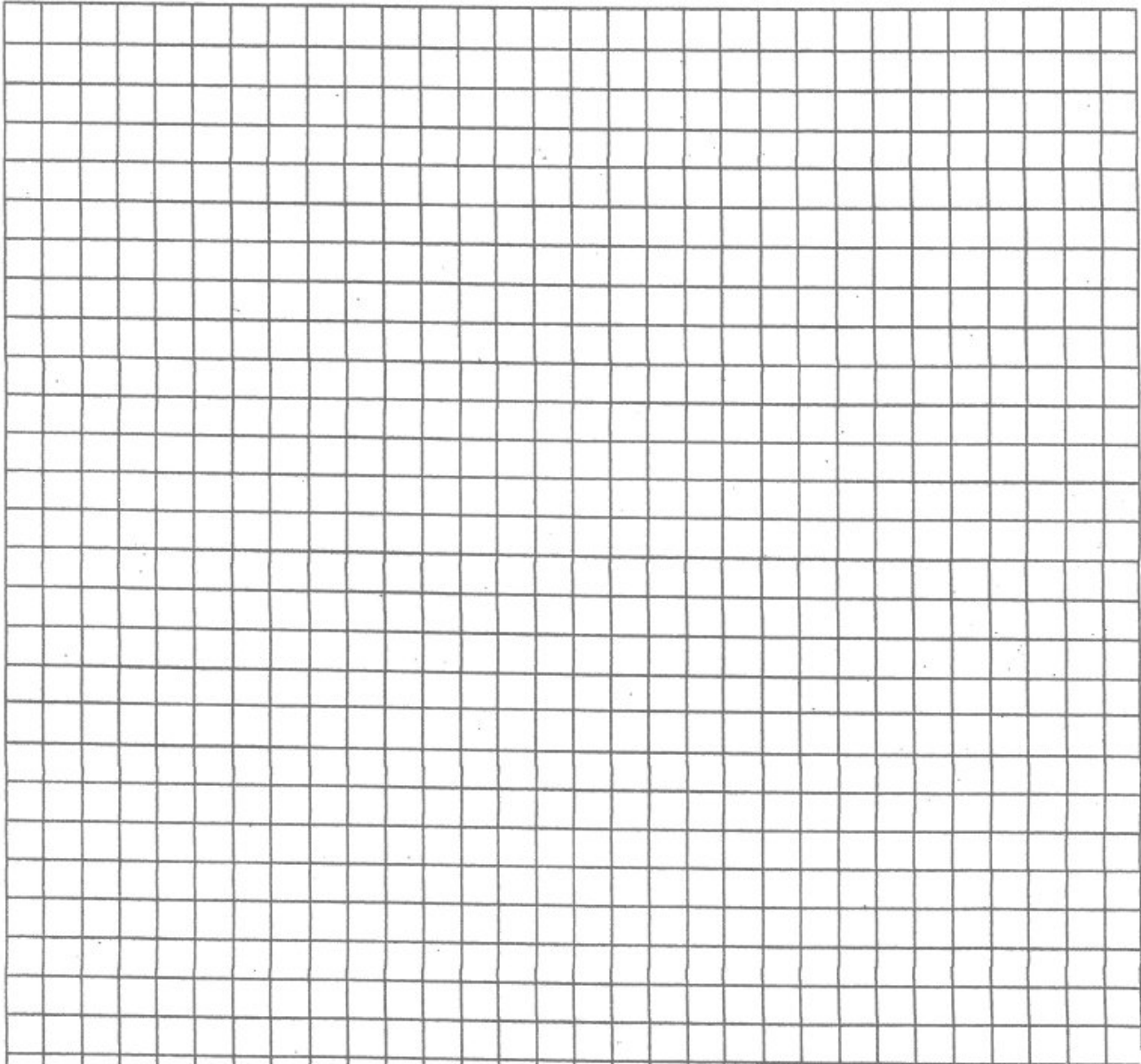
Approved Resubmit

Reason: _____

PLOT DIAGRAM

Locate clearly and distinctly all buildings, whether existing or proposed, and include all setback dimensions from property lines. Give lot and block numbers or description according to deed, and show all easements and street names and indicate whether interior or corner lot, or supply an approved plot plan showing all the above requirements.

DATE _____



NOTE:

1. IF THIS IS A VACANT LOT PRINT IN DIMENSIONS OF NEW BUILDING.
2. IF THERE IS AN EXISTING BUILDING AND A PROPOSED ADDITION PRINT IN DIMENSIONS AND SHOW ADDITION.
3. FOR NEW BUILDINGS, SUBMIT AN INSTRUMENT SURVEY OF FOUNDATION LOCATION TO THE BUILDING DEPARTMENT FOR APPROVAL BEFORE A CERTIFICATE OF OCCUPANCY IS ISSUED.

FRONT PROPERTY LINE