

# Incorporated Village of East Hampton

## Application for Building Permit

631-324-4150

www.easthamptonvillage.org

Permit Number: \_\_\_\_\_ Receipt Number: \_\_\_\_\_

Date Issued: \_\_\_\_\_ [ ] Approved [ ] Approved with Conditions

Estimated cost of work proposed: \$ \_\_\_\_\_ Permit Fee: \$ \_\_\_\_\_

Conditions: \_\_\_\_\_

Additional Work: \_\_\_\_\_

\_\_\_\_\_

Code Enforcement Officer: \_\_\_\_\_

Code Enforcement Officer: \_\_\_\_\_

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**Please Do Not Write Above This Line**

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A. Property Owner as indicated on tax roll: \_\_\_\_\_

Legal address: \_\_\_\_\_

SCTM# (301) - (\_\_\_\_\_-)(\_\_\_\_\_-)(\_\_\_\_\_-)

Mailing address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

B. Name of Applicant: \_\_\_\_\_

Relationship: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

C. Describe in detail the work proposed: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

D. Is the property in a designated Historic District?  No  Yes

E. For what purpose is the proposed structure to be used \_\_\_\_\_

F. Estimated Cost of construction \_\_\_\_\_

Additional Work Cost: \_\_\_\_\_

G. Name of Architect: \_\_\_\_\_  
New York State License #: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

H. Name of Engineer: \_\_\_\_\_  
New York State License #: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

I. Name of Contractor: \_\_\_\_\_  
East Hampton Town Home Improvement License #: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

J. Name of Electrician: \_\_\_\_\_  
Suffolk County License #: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

K. Name of Plumber: \_\_\_\_\_  
Suffolk County License #: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

L. Name of HVAC Contractor: \_\_\_\_\_  
Suffolk County License #: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

M. Name of Pool Contractor: \_\_\_\_\_  
Suffolk County License #H26 \_\_\_\_\_  
Contact: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

N. Name of Mason: \_\_\_\_\_  
East Hampton Town License #: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

O. For all pre-fabricated fireplaces (including decorative heating appliances):  
Make and Model of Fireplace or Appliance: \_\_\_\_\_  
Name of Installer: \_\_\_\_\_  
East Hampton Town Home Improvement License #: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Notice of utilization of truss construction, pre-engineered wood construction and or timber construction

Please check all that apply

- \_\_\_ New residential structure
  - \_\_\_ Addition to existing residential structure
  - \_\_\_ Rehabilitation to an existing structure
- To be constructed or performed at the above location
- \_\_\_ Truss type construction (TT)
  - \_\_\_ Pre-engineered wood construction (PW)
  - \_\_\_ Timber construction (TC)
- In the following locations
- \_\_\_ Floor framing including girders and beams (F)
  - \_\_\_ Roof Framing (R)
  - \_\_\_ Floor and roof framing (FR)

STATE OF NEW YORK)

ss:

COUNTY OF SUFFOLK)

I, \_\_\_\_\_, being duly sworn, do hereby depose, certify and state that I am the owner or a duly authorized agent for the owner of the property described herein, am duly authorized to make and file this application, am duly authorized to perform the work proposed herein,

Dated \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_

Sworn to before me this \_\_\_\_\_

Owner or Architect, Builder or Other Authorized Agent

Day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
(Notary Public)

*Revised 08/04/2023*