TOWN OF BATH

STEP BY STEP INSTRUCTIONS
TO COMPLETE A BUILDING PERMIT

DATE RECEIVED		N OF BATH	(Expires 1 Year From Issue Date)
DATE ISSUED			PERMIT NO
NOTE: ADDITIONAL \$50			
BEFORE BUILDING PERM	IT IS ISSUED BY C.E.	O. Check#	Code Enforcement Officer
1. Code Enforcement Offic		ST be notified:	
1. BEFORE covering 2. BEFORE footers	g septic system and/or foundation wa	lls are poured	NOTE: NO PROJECTS TO
3. WHEN framing is	up		BE USED OR OCCUPIED UNTIL FINAL INSPECTION
5. BEFORE project	is used or occupied (s	umbing,and insulation see NOTE;)	AND APPROVAL!
2. Highway supervisor to b			ASE COMPLETE ATTACHED FORM!
APPLICATION FOR BUILDI			ASE COMPLETE ATTACHED FORMS
			DF LOT:
		name:	
			(Other)
APPLICANT'S NAME:		Phone: (Home)	(Other)
APPLICANT'S MAILING AD	DRESS:		
CONTRACTOR'S NAME:		Phone: (home)	(Other)
		Use:	
(plea	se include DETAILED si	kelch or blue print - see graph o	on 2nd form)
BUILDING TO BE	ft. wide by	ft.long/	stories/square. ft.
Nature of work (check ALL t			
	☐ Septic System		le Homex
	☐ Demolition		ılar Home xx
☐ Alteration		(If Manufactured Home, F)	
		SER	
' New Q Used 1	EAR BUILT	MODEL	
). HEATING: Heat Type:	Hot Air.	Hot Water/Steam,	Electric, Other
Fual Type:	None, Gas,	Electric,Oil,	Wood, Coal, Solar
. CENTRAL AIR CONDITIO	NING: D Yes D No	11. FIREPLA	ACE: Yes No
CHECK ONE: U Slab	U Crawl Space 0	Basement/Cellar/Num	ber of Basement Garage Openings
LESTIMATED COST: LAB			
ESTIMATED COMPLETIO	NDATE:		

PROJECT LOCATION

ADDRESS OF THE PROJECT LOCATION

IF YOU HAVE VACANT LAND, YOU MUST CALL THE STEUBEN COUNTY 911 OFFICE TO OBTAIN AN ADDRESS AT 664.2992

DATE RECEIVED		N OF BATH DING PERMIT	(Expires 1 Year From Issue Dat
DATE ISSUED	FEE/	FORM OF PAYMENT:	PERMIT NO
NOTE: ADDITIONAL \$50 FEE			
BEFORE BUILDING PERMIT	S ISSUED BY C.E.O	Check #	Code Enforcement Officer
5. BEFORE project is u 2. Highway supervisor to be no	eptic system Nor foundation walk ectrical wiring, plun sed or occupied (so stilled BEFORE inst	s are poured nbing,and insulation to NOTE;)	NOTE: NO PROJECTS TO BE USED OR OCCUPIED UNTIL FINAL INSPECTION AND APPROVAL!
APPLICATION FOR BUILDING F	ERMIT (Please prin	nt and fill in completely).	
1. PROJECT LOCATION (Include	Fire Number & Road	Name):	
2. TAX MAP NUMBER:		size o	OF LOT:
Subdivision: Yes No If YE			
3. LAND OWNER'S NAME:		Phone: (Home)	(Other)
4.APPLICANT'S NAME:		Phone: (Home)	(Other)
5.APPLICANT'S MAILING ADDRE	SS:		
6. CONTRACTOR'S NAME:		Phone: (home)	(Other)
7. PROJECT DESCRIPTION:		Use:	
(please in	iclude DETAILED ske	elch or blue print - see graph o	n 2nd form)
8. BUILDING TO BE	ft, wide by	tt.long/	stories/square. I
Anna Carlos	Septic System Demolition		le Home xx Il In Below)
* NAME OF MANUFACTU		SERI	
· O New O Used YEAR	R BUILT M	ODEL	
10. HEATING: Heat Type:	Hot Air.	Hot Water/Steam.	Electric, Othe
			Wood, Coal, Sole
11. CENTRAL AIR CONDITIONING			
13. CHECK ONE: U Slab	Crawl Space	Basement/Cellar/Num	ber of Basement Garage Openings
14. ESTIMATED COST: LABOR_			
15. ESTIMATED COMPLETION DA	ITE:		
Applicant Signature:		Date:	

TAX MAP NUMBER

ENTER THE TAX MAP
ID NUMBER WHICH
CAN BE FOUND ON
YOUR LAND OWNERS
TAX BILL

OR

CONTACT THE
STEUBEN COUNTY
REAL PROPERTY TAX
OFFICE AT 776.9631

SIZE OF LOT

THE ACREAGE CAN BE FOUND ON YOUR TAX BILL

SUBDIVISION

COMPLETE ONLY IF YOU HAVE RECENTLY SUBDIVIDED

ATE ISSUED FEE	Code Enforcement Officer, (607) 776-5184, MUST be notified: 1. BEFORE covering septic system 2. BEFORE footers and/or foundation walls are poured 3. WHEN framing is up 4. BEFORE covering electrical wiring, plumbing, and insulation 5. BEFORE project is used or occupied (see NOTE) MIghway supervisor to be notified BEFORE installing driveway. A fire number must be obtained from the 9-1-1 Enhanced Department. PLEASE COMPLETE ATTACHED FORM PPLICATION FOR BUILDING PERMIT (Please print and fill in completely). PROJECT LOCATION (Include Fire Number & Road Name): TAX MAP NUMBER: PROJECT LOCATION (Include Fire Number & Road Name): PPLICANT'S NAME: PPLICANT'S NAME: Phone: (Home) (Other) PPLICANT'S MAILING ADDRESS: CONTRACTOR'S NAME: Phone: (home) (Other) PROJECT DESCRIPTION: Use: (please include DETAILED skelch or blue print - see graph on 2nd form) BUILDING TO BE ft. wide by t.long/ square Interest and Code Enforcement Office. Code Enforcement Office. ROTE: NO PROJECTS TO BE Interest To BE USED OR OCCUPIED NOTE: NO PROJECTS TO BE Interest To BE USED OR OCCUPIED NOTE: NO PROJECTS TO BE INTEREST TO PROJECTS TO BE USED OR OCCUPIED NOTE: NO PROJECTS TO BE UNTIL FINAL INSPECTION AND APPROVAL! NOTE: NO PROJECTS TO BE USED OR OCCUPIED NOTE: NO PROJECTS TO BE USED OR OCCUPIED NOTE: NO PROJECTS TO BE USED OR OCCUPIED NOTE: NO PROJECTS TO BE UNTIL FINAL INSPECTION AND APPROVAL! NOTE: NO PROJECTS TO BE UNTIL FINAL INSPECTION BE USED OR OCCUPIED UNTIL FINAL INSPECTION AND APPROVAL! NOTE: NO PROJECTS TO BE USED OR OCCUPIED NOTE: NO PROJECTS TO BE UNTIL FINAL INSPECTION Characteristics NOTE: NO PROJECTS TO BE UNTIL FINAL INSPECTION AND APPROVAL! NOTE: NO PROJECTS TO BE USED OR OCCUPIED NOTE: NO PROJECTS TO BE UNTIL FINAL INSPECTION AND APPROVAL! NOTE: NO PROJECTS TO BE USED OR OCCUPIED NOTE: NO PROJECTS TO BE UNTIL FINAL INSPECTION AND APPROVAL! NOTE: NO PROJECTS TO BE USED OR OCCUPIED NOTE: NO PROJECTS TO BE UNTIL FINAL INSPECTION AND APPROVAL! NOTE: NO PROJECTS TO BE USED OR OCCUPIED	4V+11	WN OF BATH UILDING PERMIT (Expires	1 Year From Issue Date
Code Enforcement Officer	Code Enforcement Officer, (607) 776-6184, MUST be notified: 1. BEFORE covering septic system 2. BEFORE footers and/or foundation walls are poured 3. WHEN traming is up 4. BEFORE covering electrical wiring, plumbing, and insulation 5. BEFORE project is used or occupied (see NOTE.) Highway supervisor to be notified BEFORE installing driveway. A fire number must be obtained from the 9-1-1 Enhanced Department. PLEASE COMPLETE ATTACHED FORM PPLICATION FOR BUILDING PERMIT (Please print and fill in completely). PROJECT LOCATION (Include Fire Number & Road Name): TAX MAP NUMBER: AND OWNER'S NAME: Phone: (Home) (Other) PPLICANT'S MAILING ADDRESS: CONTRACTOR'S NAME: Phone: (home) (Other) PROJECT DESCRIPTION: (ploase include DETAILED skelch or blue print - see graph on 2nd form) BUILDING TO BE ft. wide by ft.long/ square lature of work (check ALL that are applicable)	DFEE	FORM OF PAYMENT: PERMIT	NO
Code Enforcement Officer, (607) 776-6184, MUST be notified: 1. BEFORE covering septic system 2. BEFORE footers and/or foundation walls are poured 3. WHEN framing is up 4. BEFORE covering electrical wiring, plumbing and insulation 5. BEFORE project is used or occupied (see MOTE) MAND APPROVAL! A. Highway supervisor to be notified BEFORE installing driverays, 8. A fire number must be obtained from the 9-t-1 Enhanced Department. PLEASE COMPLETE ATTACHED FORMI PPLICATION FOR BUILDING PERMIT (Please print and fill in completely). PROJECT LOCATION (Include Fire Number & Road Name): SIZE OF LOT: TAX MAP NUMBER: SIZE OF LOT: Subdivision: Yes No If YES, previous owner's name: LAND OWNER'S NAME: Phone: (Home) (Other) APPLICANT'S MAILING ADDRESS: Phone: (Home) (Other) APPLICANT'S MAILING ADDRESS: Phone: (home) (Other) PROJECT DESCRIPTION: Use: Glease include DETAILED skelch or blue print - see graph on 2nd form) BUILDING TO BE fi. wide by tillong/ stories/ square. ft. Nature of work (check ALL that are applicable) New Structure Septic System Set Manufactured Mobile Home x quare. ft. Nature of work (check ALL that are applicable) New Structure Septic System Set Manufactured Mobile Home x quare. ft. Nature of MANUFACTURER	Code Enforcement Officer, (607) 776-6184, (NUST be notified: 1. BEFORE covering septic system 2. BEFORE feoters and/or foundation walls are poured 3. WHEN framing is up 4. BEFORE covering electrical wiring, plumbing, and insulation 5. BEFORE project is used or occupied (see NOTE) Highway supervisor to be notified BEFORE installing driveway. A fire number must be obtained from the 9-1-1 Enhanced Department. PLEASE COMPLETE ATTACHED FORM PLICATION FOR BUILDING PERMIT (Please print and fill in completely). PROJECT LOCATION (Include Fire Number & Road Name): TAX MAP NUMBER: AND OWNER'S NAME: Phone: (Home) (Other) PPLICANT'S NAME: Phone: (Home) (Other) PPLICANT'S MAILING ADDRESS: CONTRACTOR'S NAME: Phone: (home) (Other) PROJECT DESCRIPTION: (ploase include DETAILED skelch or blue print - see graph on 2nd form) BuilDING TO BE ft. wide by ft. long/ square lature of work (check ALL that are applicable)		Address and the second	
1. BEFORE covering septic system 2. BEFORE footers and/or foundation walls are poured 3. WHEN traming is up 4. BEFORE covering electrical wiring, plumbing and insulation 5. BEFORE project is used or occupied (see *MOTE*)	1. BEFORE covering septic system 2. BEFORE footers and/or foundation walls are poured 3. WHEN framing is up 4. BEFORE covering electrical wiring, plumbing, and insulation 5. BEFORE project is used or occupied (see NOTE;)		Coo	e Enforcement Officer
TAX MAP NUMBER: Subdivision: Q Yes Q No If YES, previous owner's name: LAND OWNER'S NAME: Phone: (Home) (Other) APPLICANT'S NAME: Phone: (Home) (Other) APPLICANT'S MAILING ADDRESS: CONTRACTOR'S NAME: Phone: (home) (Other) PROJECT DESCRIPTION: Use: (please include DETAILED skelch or blue print - see graph on 2nd form) BUILDING TO BE ft. wide by tt.long/ stories/ square. ft. Nature of work (check ALL that are applicable) New Structure Septic System Set Manufactured Mobile Home	TAX MAP NUMBER:	EFORE covering septic system EFORE footers and/or foundation WHEN framing is up EFORE covering electrical wiring EFORE project is used or occupil supervisor to be notified BEFORI mber <u>must</u> be obtained from the 9	walls are poured plumbing, and insulation of discension of the control of the co	D OR OCCUPIED NAL INSPECTION APPROVAL!
Subdivision: Yes No if YES, previous owner's name: LAND OWNER'S NAME:	AND OWNER'S NAME: Phone: (Home) (Other) PPLICANT'S NAME: Phone: (Home) (Other) PPLICANT'S MAILING ADDRESS: CONTRACTOR'S NAME: Phone: (home) (Other) PROJECT DESCRIPTION: Use: (please include DETAILED sketch or blue print - see graph on 2nd form) BUILDING TO BE ft. wide by ft.long/ stories/ square	LOCATION (Include Fire Number &	Road Name):	
Subdivision: Yes No if YES, previous owner's name: LAND OWNER'S NAME:	AND OWNER'S NAME: Phone: (Home) (Other) PPLICANT'S NAME: Phone: (Home) (Other) PPLICANT'S MAILING ADDRESS: CONTRACTOR'S NAME: Phone: (home) (Other) PROJECT DESCRIPTION: Use: (please include DETAILED sketch or blue print - see graph on 2nd form) BUILDING TO BE ft. wide by ft.long/ stories/ square	NUMBER:	- SIZE OF LOT:	
APPLICANT'S NAME: Phone: (Home) (Other) APPLICANT'S MAILING ADDRESS: Phone: (home) (Other) PROJECT DESCRIPTION: Use: (ploase include DETAILED skelch or blue print - see graph on 2nd form) BUILDING TO BE ft. wide by ft.long/ stories/ square. ft. Nature of work (check ALL that are applicable) Septic System Set Manufactured Mobile Home x Addition Demolition Set Manufactured Modular Home x Alteration Other (If Manufactured Home, Fill in Below) NAME OF MANUFACTURER SERIAL NO. HEATING: Hest Type: Hot Air, Hot Water/Steam, Electric, Other Fuel Type: None, Gas, Electric, Oil, Wood, Coal, Solar CENTRAL AIR CONDITIONING: Yes No 11. FIREPLACE: Yes No CHECK ONE: Stab Crawl Space Basement/Cellat/ Number of Basement Garage Openings	PPLICANT'S NAME: Phone: (Home) (Other) PPLICANT'S MAILING ADDRESS: CONTRACTOR'S NAME: Phone: (home) (Other) PROJECT DESCRIPTION: Use: (ploase include DETAILED sketch or blue print - see graph on 2nd form) PUILDING TO BE ft. wide by tt.long/ stories/ square			
APPLICANT'S MAILING ADDRESS: CONTRACTOR'S NAME: Phone: (home) Use: (please include DETAILED skelch or blue print - see graph on 2nd form) BUILDING TO BE ft. wide by tt.long/ stories/ square. ft. Nature of work (check ALL that are applicable) New Structure Septic System Set Manufactured Mobile Home X Addition Demolition Set Manufactured Modular Home X Alteration Other (If Manufactured Home, Fill In Below) * NAME OF MANUFACTURER SERIAL NO. * NAME OF MANUFACTURER Hot Air, Hot Water/Steam, Fuel Type: None, Gas, Electric, Oil, Wood, Coal, Solar CENTRAL AIR CONDITIONING: Yes No CHECK ONE: Basement Gerage Openings	PPLICANT'S MAILING ADDRESS:	NER'S NAME:	Phone: (Home)	(Other)
CONTRACTOR'S NAME: Phone; (home) (Other) PROJECT DESCRIPTION: Use: (please include DETAILED skelch or blue print - see graph on 2nd form) BUILDING TO BE ft. wide by ft.long/ stories/ square. ft. Nature of work (check ALL that are applicable) New Structure Septic System Set Manufactured Mobile Home x Addition Demolition Set Manufactured Modular Home x Alteration Other (If Manufactured Home, Fill In Below) NAME OF MANUFACTURER SERIAL NO. NAME OF MANUFACTURER SERIAL NO. HEATING: Heat Type: Hot Air. Hot Water/Steam, Electric, Other fuel Type: None, Gas, Electric, Oil, Wood, Coal, Solar CENTRAL AIR CONDITIONING: Yes No 11. FIREPLACE: Yes No CHECK ONE: Slab Crawl Space Basement/Cellar/ Number of Basement Garage Openings	CONTRACTOR'S NAME: Phone; (home) (Other) PROJECT DESCRIPTION: Use: (please include DETAILED skelch or blue print - see graph on 2nd form) BUILDING TO BEft. wide bytt.long/square	TS NAME:	Phone: (Home)	(Other)
PROJECT DESCRIPTION: (please include DETAILED sketch or blue print - see graph on 2nd form) BUILDING TO BE	PROJECT DESCRIPTION: Use:	T'S MAILING ADDRESS:		
(please include DETAILED skelch or blue print - see graph on 2nd form) BUILDING TO BEft. wide bytLlong/stories/square. ft. Nature of work (check ALL that are applicable) New Structure	(please include DETAILED sketch or blue print - see graph on 2nd form) DUILDING TO BEft. wide bytt.long/stories/square lature of work (check ALL that are applicable)	TOR'S NAME:	Phone: (home)	(Other)
BUILDING TO BE	ISUILDING TO BEft. wide byft.long/stories/square			
Nature of work (check ALL that are applicable) New Structure Septic System Set Manufactured Mobile Home	lature of work (check ALL that are applicable)			
□ New Structure □ Septic System □ Set Manufactured Mobile Home		TO BEft. wide by	tt.long/stories/	square. ft.
* New ☐ Used YEAR BUILT MODEL HEATING: Heat Type: Hot Air, Hot Water/Steam, Electric, Other Fuel Type: None, Gas, Electric, Oil, Wood, Coal, Solar CENTRAL AIR CONDITIONING: ☐ Yes ☐ No 11. FIREPLACE: ☐ Yes ☐ No CHECK ONE: ☐ Slab ☐ Crawl Space ☐ Basement/Cellat/ Number of Basement Garage Openings	☐ Addition ☐ Demolition	ew Structure	 □ Set Manufactured Modular Home (If Manufactured Home, Fill In Below) 	X
HEATING: Heat Type: Hot Air Hot Water/Steam, Electric, Other Fuel Type: None, Gas, Electric, Oil, Wood, Coal, Solar CENTRAL AIR CONDITIONING: _ Yes _ No 11. FIREPLACE: _ Yes _ No CHECK ONE: _ Slab _ Crawl Space _ Basement/Cellat/ Number of Basement Garage Openings				
Fuel Type:None, Gas, Electric, Oil, Wood, Coal, Solar CENTRAL AIR CONDITIONING:				
CENTRAL AIR CONDITIONING: Yes No 11. FIREPLACE: Yes No CHECK ONE: U Slab Crawl Space Basement/Cellar/ Number of Basement Garage Openings				
CHECK ONE: U Slab				
ESTIMATED COST: LABOR MATERIAL	CHECK ONE: U Stab	NE: U Slab U Crawl Space	Basement/Cellar/Number of Basen	nent Garage Openings
	STIMATED COST: LABOR MATERIAL	D COST: LABOR	MATERIAL	

LAND OWNERS NAME

ENTER THE CURRENT LAND OWNERS NAME

PHONE NUMBER

ENTER THE CURRENT LAND OWNERS TELEPHONE NUMBER

DAT	E RECEIVED	TO BU	W N TLDII	OF BATH	(Expires 1 Year Fr	Om Issue Date
DAT	E ISSUED	FEE/_		FORM OF PAYMENT:	PERMIT NO.	
	TE: ADDITIONAL \$50			Cash	-	
BE	FORE BUILDING PER		.0,	Check #	Code Enforce	
2. H 3. A	ode Enforcement Offi 1. BEFORE coveri 2. BEFORE footer 3. WHEN traming 4. BEFORE coveri 5. BEFORE project lighway supervisor to 1 fire number must be	eer, (607) 776-6184, M ng septic system s and/or foundation w is up ng electrical wiring, p t is used or occupied be notified BEFORE is obtained from the 9-1	alls are lumbing (see NC nstalling 4 Enhal	poured grand insulation official grand driveway, need Department. PLE	NOTE: NO PRODE BE USED OR O UNTIL FINAL INSERT AND APPRODUCE ASSESSMENT OF THE PRODUCE ATTACHED BY THE PRODUCE BY THE BY THE PRODUCE BY THE BY	JECTS TO CCUPIED SPECTION DVAL!
	LICATION FOR BUILD					
	ROJECT LOCATION (In					
2. T/	X MAP NUMBER:			SIZE	OF LOT:	
Sul	bdivision: 🛘 Yes 🗘 No	If YES, previous owner	s name:			
3. LA	ND OWNER'S NAME:_		·	Phone: (Home)	(Other)	***************************************
A.AP	PLICANT'S NAME:			Phone: (Home)	(Other)	
S.AP	PLICANT'S MAILING AL	DDRESS:	***************************************			
6. CC	ONTRACTOR'S NAME:			Phone: (home)	(Other)	
7. PF	OJECT DESCRIPTION			Use		
	(pio	ase include DETAILED	sketch c	or blue print - see graph (on 2nd form)	
8. BU	IILDING TO BE	ft. wide by		ft.long/	stories/	square. f
9. Na		☐ Septic System		Set Manufactured Mob		
	Addition Alteration	Other		Set Manufactured Mod Manufactured Home, F		X
		ACTURER			IAL NO.	
		YEAR BUILT				
10 H						
IV. FI				Hot Water/Steam, Electric, Oil,		
				11. FIREPLI		, and an
				ement/Cellar/Nun	nber of Basement Gara	ge Openings
	STIMATED COST: LAI			RIAL	-	
15. ES	STIMATED COMPLETIO	ON DATE:				
	cant Signature:			Date:		

APPLICANTS NAME

NAME OF INDIVIDUAL APPLYING FOR BUILDING PERMIT

MUST ALSO SUBMIT COPY OF CE200

TOWN OF BATH (Expires 1 Year From Issue Date) DATE RECEIVED BUILDING PERMIT FEE / DATE ISSUED FORM OF PAYMENT: PERMIT NO. Cash NOTE: ADDITIONAL \$50 FEE FOR WORK BEGUN BEFORE BUILDING PERMIT IS ISSUED BY C.E.O. Check # Code Enforcement Officer 1. Code Enforcement Officer, (607) 776-6184, MUST be notified: 1. BEFORE covering septic system **NOTE:** NO PROJECTS TO 2. BEFORE footers and/or foundation walls are poured BE USED OR OCCUPIED 3. WHEN framing is up UNTIL FINAL INSPECTION 5. BEFORE project is used or occupied (see NOTE:) AND APPROVAL! 2. Highway supervisor to be notified BEFORE installing driveway. 3. A fire number must be obtained from the 9-1-1 Enhanced Department. PLEASE COMPLETE ATTACHED FORM! APPLICATION FOR BUILDING PERMIT (Please print and fill in completely). PROJECT LOCATION (Include Fire Number & Road Name): 2. TAX MAP NUMBER: - - SIZE OF LOT: Subdivision: Q Yes Q No. If YES, previous owner's name: 3 LAND OWNER'S NAME: Phone: (Home) (Other) 4 APPLICANT'S NAME: Phone: (Home) (Other) 5.APPLICANT'S MAILING ADDRESS: 6. CONTRACTOR'S NAME: Phone: (home) (Other) 7. PROJECT DESCRIPTION: (please include DETAILED sketch or blue print - see graph on 2nd form) 8. BUILDING TO BE ft. wide by ft.long/ stories/ square. ft. 9. Nature of work (check ALL that are applicable) ☐ New Structure Addition . ☐ Demolition •☐ Set Manufactured Modular Home ____x ☐ Alteration Other • (If Manufactured Home, Fill In Below) * NAME OF MANUFACTURER SERIAL NO. * O New O Used YEAR BUILT MODEL 10. HEATING: Heat Type: Hot Air, Hot Water/Steam, Electric, Other Fuel Type: None, Gas, Electric, Oil, Wood, Coal, Solar 11. CENTRAL AIR CONDITIONING: ☐ Yes ☐ No 11. FIREPLACE: ☐ Yes ☐ No 14. ESTIMATED COST: LABOR MATERIAL 15. ESTIMATED COMPLETION DATE: Applicant Signature:

APPLICANT'S MAILING ADDRESS

ADDRESS OF INDIVIDUAL APPLY FOR BUILDING PERMIT

(Expires 1 Year From Issue Date) TOWN OF BATH
BUILDING PERMIT DATE RECEIVED DATE ISSUED FEE FORM OF PAYMENT: PERMIT NO. Cash _____ NOTE: ADDITIONAL \$50 FEE FOR WORK BEGUN BEFORE BUILDING PERMIT IS ISSUED BY C.E.O. Check # Code Enforcement Officer 1. Code Enforcement Officer, (607) 776-6184, MUST be notified: 1. BEFORE covering septic system NOTE: NO PROJECTS TO 2. BEFORE footers and/or foundation walls are poured BE USED OR OCCUPIED 3. WHEN framing is up 4. BEFORE covering electrical wiring, plumbing, and insulation ______ UNTIL FINAL INSPECTION 5. BEFORE project is used or occupied (see NOTE:) AND APPROVAL! 2. Highway supervisor to be notified BEFORE installing driveway. 3. A fire number must be obtained from the 9-1-1 Enhanced Department. PLEASE COMPLETE ATTACHED FORM! APPLICATION FOR BUILDING PERMIT (Please print and fill in completely), 1. PROJECT LOCATION (Include Fire Number & Road Name): _____ 2. TAX MAP NUMBER: SIZE OF LOT: Subdivision: Yes No. If YES, previous owner's name: 3. LAND OWNER'S NAME: Phone: (Home) (Other) 4.APPLICANT'S NAME: Phone: (Home) (Other) 5.APPLICANT'S MAILING ADDRESS: 6. CONTRACTOR'S NAME: Phone: (home) (Other) 7. PROJECT DESCRIPTION: (please include DETAILED sketch or blue print - see graph on 2nd form) 8. BUILDING TO BE ______ft. wide by ______ft.long/ ______square. ft. 9. Nature of work (check ALL that are applicable) ☐ New Structure ☐ Septic System • ☐ Set Manufactured Mobile Home x Addition ☐ Demolition Set Manufactured Modular Home x Other • (If Manufactured Home, Fill In Below) Q Alteration * NAME OF MANUFACTURER SERIAL NO. · New Used YEAR BUILT MODEL 10. HEATING: Heat Type: Hot Air, Hot Water/Steam, Electric. Fuel Type: _____None, ____Gas, ____Electric, Oil, ____Wood, ____Coal, ___ Solar 11. CENTRAL AIR CONDITIONING; ☐ Yes ☐ No 11. FIREPLACE: ☐ Yes ☐ No 13. CHECK ONE: U Slab Crawl Space D Basement/Cellar/ Number of Basement Garage Openings 14. ESTIMATED COST: LABOR_______ MATERIAL 15. ESTIMATED COMPLETION DATE: Applicant Signature: Date:

CONTRACTOR'S NAME AND TELEPHONE NUMBER

FILL IN CONTRACTOR'S NAME AND TELEPHONE NUMBER

IF A CONTRACTOR IS
USED, A COPY OF THEIR
WORKMAN'S
COMPENSATION
INSURANCE IS
REQUIRED

(Expires 1 Year From Issue Date) TOWN OF BATH DATE RECEIVED DATE ISSUED FEE__/_ FORM OF PAYMENT: PERMIT NO. -Cash _____ NOTE: ADDITIONAL \$50 FEE FOR WORK BEGUN BEFORE BUILDING PERMIT IS ISSUED BY C.E.O. Code Enforcement Officer 1. Code Enforcement Officer, (607) 776-6184, MUST be notified: BEFORE covering septic system
 BEFORE footers and/or foundation walls are poured **NOTE: NO PROJECTS TO** BE USED OR OCCUPIED 3. WHEN framing is up 4. BEFORE covering electrical wiring, plumbing, and insulation ______ UNTIL FINAL INSPECTION 5. BEFORE project is used or occupied (see NOTE;) AND APPROVAL! 2. Highway supervisor to be notified BEFORE installing driveway. 3. A fire number must be obtained from the 9-1-1 Enhanced Department. PLEASE COMPLETE ATTACHED FORM! APPLICATION FOR BUILDING PERMIT (Please print and fill in completely). PROJECT LOCATION (Include Fire Number & Road Name): 2. TAX MAP NUMBER: . SIZE OF LOT: Subdivision: Q Yes Q No. If YES, previous owner's name:____ 3. LAND OWNER'S NAME: Phone: (Home) (Other) 4.APPLICANT'S NAME: Phone: (Home) (Other) 5.APPLICANT'S MAILING ADDRESS: Phone: (home)_____(Other) 6. CONTRACTOR'S NAME: 7. PROJECT DESCRIPTION: Use: (please include DETAILED sketch or blue print - see graph on 2nd form) 8. BUILDING TO BE ft. wide by tt.long/ stories/ square. ft. 9. Nature of work (check ALL that are applicable) □ New Structure □ Septic System •□ Set Manufactured Mobile Home x ☐ Addition ☐ Demolition •☐ Set Manufactured Modular Home ____x___ Other . ☐ Alteration • (If Manufactured Home, Fill In Below) * NAME OF MANUFACTURER SERIAL NO. O New Q Used YEAR BUILT MODEL 10. HEATING: Heat Type: _____ Hot Air, _____ Flot Water/Steam, ____ Electric, Other Fuel Type: ____None, ___ Gas, ___Electric, Oil, ___Wood, ___ Coal, ____ 11. CENTRAL AIR CONDITIONING: ☐ Yes ☐ No 11. FIREPLACE: ☐ Yes ☐ No 13. CHECK ONE: U Slab U Crawl Space U Basement/Cellar/ Number of Basement Garage Openings 14. ESTIMATED COST: LABOR MATERIAL 15. ESTIMATED COMPLETION DATE: Applicant Signature:

PROJECT DESCRIPTION

BREIF DESCRIPTION OF THE NATURE OF THE PROJECT

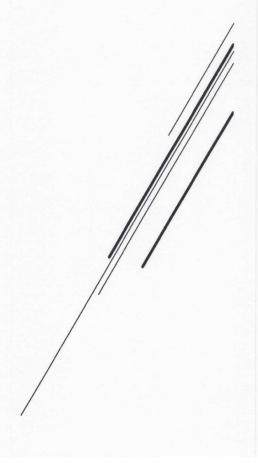
USE

INDICATE IF THE STRUCTURE WILL BE COMMERICAL OR RESIDENTIAL

DATE RECEIVED		OF BATH	(Expires 1 Year From Issue Date
DATE ISSUED			PERMIT NO. —
NOTE: ADDITIONAL \$50 FEE F		Cash	
BEFORE BUILDING PERMIT IS		Check #	Code Enforcement Officer
Code Enforcement Officer, (60 BEFORE covering sep		notified:	
2. BEFORE footers and/o		e poured	NOTE: NO PROJECTS TO BE USED OR OCCUPIED
3. WHEN framing is up 4. BEFORE covering elec			UNTIL FINAL INSPECTION
5. BEFORE project is use 2. Highway supervisor to be noti	ed or occupied (see <u>N</u> fled BEFORE installir	OTE;)	AND APPROVAL!
3. A fire number must be obtained	d from the 9-1-1 Enh	inced Department. PLE/	ASE COMPLETE ATTACHED FORM
APPLICATION FOR BUILDING PE			
PROJECT LOCATION (Include F)			
			F LOT:
Subdivision: Tyes I No If YES,			
3. LAND OWNER'S NAME:		Phone: (Home)	(Other)
APPLICANT'S NAME:		Phone: (Home)	(Other)
5.APPLICANT'S MAILING ADDRES	S:		
6. CONTRACTOR'S NAME:		Phone: (home)	(Other)
7. PROJECT DESCRIPTION:		Use:	
(please inc	lude DETAILED skeich	or blue print - see graph o	n 2nd form)
B. BUILDING TO BE	_ft. wide by	tt.long/	stories/square. If
9. Nature of work (check ALL that an			
☐ New Structure ☐ :			e Homex
Addition (1)			lar Home xx
* NAME OF MANUFACTUR			
· O New O Used YEAR			
			Electric, Other Wood, Coal, Solar
11. CENTRAL AIR CONDITIONING:			
13. CHECK ONE: U Slab 0			ber of Basement Garage Openings
14. ESTIMATED COST: LABOR		ERIAL	
15. ESTIMATED COMPLETION DAT	E		
Applicant Signature:		Date:	

BUILDING TO BE

ENTER THE
DIMENSIONS OF THE
PROPOSED STRUCTURE



DATE RECEIVED		VN OF BATH	(Expires 1 Year From Issue Da
DATE ISSUED	FEE /	FORM OF PAYMENT:	PERMIT NO. —
NOTE: ADDITIONAL \$50			
BEFORE BUILDING PERI	MIT IS ISSUED BY C.E.	O. Check #	Code Enforcement Officer
. Code Enforcement Offic		ST be notified:	
BEFORE covering BEFORE footers	ng septic system s and/or foundation wa	lls are poured	NOTE: NO PROJECTS TO
3. WHEN framing i	sup		BE USED OR OCCUPIED UNTIL FINAL INSPECTION
5. BEFORE project	is used or occupied (umbing, and insulation see NOTE;)	AND APPROVAL!
2. Highway supervisor to I	be notified BEFORE in	stalling driveway.	SE COMPLETE ATTACHED FORM!
PPLICATION FOR BUILDI			SE COMPLETE ATTACHED FORMS
		ad Name):	
			FLOT:
		name:	
LAND OWNER'S NAME:_		Phone: (Home)	(Other)
			(Other)
CONTRACTOR'S NAME:		Phone: (home)	(Other)
PROJECT DESCRIPTION:		Use:	
(ploa	ase include DETAILED s	kelch or blue print - see graph o	n 2nd form)
BUILDING TO BE	ft. wide by	tt.long/	stories/square.
Nature of work (check ALL)	that are applicable)		
	☐ Septic System		e Homex
	Demolition		lar Home x
☐ Alteration		(II Manufactured Home, Fill	
		SERI.	AL NO.
* New D Used *	YEAR BUILT	MODEL	
. HEATING: Heat Type:	Hot Air,	Hot Water/Steam,	Electric, Oth
Fuel Type:	None, Gas.	Electric, Oil,	Wood, Coal, So
CENTRAL AIR CONDITIO	NING: Q Yes Q No	11. FIREPLA	CE: Yes No
CHECK ONE: U Slab	Crawl Space (Basement/Cellar/Numi	per of Basement Garage Openings
ESTIMATED COST: LAB	OR	MATERIAL	
ESTIMATED COMPLETIO	N DATE:		
oplicant Signature:		Date:	

NATURE OF WORK

CHECK APPROPIATE BOX

BOX CHECKED SHOULD COINSIDE WITH LINE #7

NAME OF MANUFACTURER/SERIAL #

APPLIES TO MFG. HOMES ONLY ATTACH COPY OF MANUFACTURER INSTALLATION INSTRUCTIONS AND NYS CERTIFIED INSTALLER'S INFORMATION

DATE RECEIVED		WN OF BAIH	(Expires 1 real Fight 1990 Date)
DATE ISSUED	FCE/_	FORM OF PAYMENT:	PERMIT NO
NOTE: ADDITIONAL 550			
BEFORE BUILDING PER	WHI IS ISSUED BY CI	Check #	Code Enforcement Officer
3. WHEN framing I 4. BEFORE coveri 5. BEFORE projec 2. Highway supervisor to	ng septic system s and/or foundation w s up ng electrical wiring, p t is used or occupied be notified BEFORE is	lumbing, and insulation (see <u>NOTE</u> ;)	NOTE: NO PROJECTS TO BE USED OR OCCUPIED UNTIL FINAL INSPECTION AND APPROVAL!
APPLICATION FOR BUILD	NG PERMIT (Please)	orint and fill in completely),	
1. PROJECT LOCATION (In	dude Fire Number & Ri	nad Name):	
2. TAX MAP NUMBER:		- , SIZE C	DF LOT:
Subdivision: 2 Yes 2 No	If YES, previous owner	s name:	
3. LAND OWNER'S NAME:_		Phone: (Home)	(Other)
APPLICANT'S NAME:		Phone: (Home)	(Other)
APPLICANT'S MAILING AD	DRESS:		
CONTRACTOR'S NAME:		Phone: (home)	(Other)
PROJECT DESCRIPTION:			
(ple	ase include DETAILED	skelch or blue print - see graph o	in 2nd form)
BUILDING TO BE	ft. wide by	ft.long/	stories/square. ft.
. Nature of work (check ALL			
☐ New Structure	☐ Septic System		le Homex
	☐ Demolition		ular Home x
	Other		
* NAME OF MANUFA	CTURER	SER	IAL NO.
¹ ☐ New ☐ Used	YEAR BUILT	MODEL	
0. HEATING: Heat Type:	Hot Air,	Hot Water/Steam,	Electric, Other
			Wood, Coal, Solar
1. CENTRAL AIR CONDITIO	NING: Q Yes Q No	11. FIREPLA	ACE: Yes No
3. CHECK ONE: U Slab	Crawl Space	☐ Basement/Cellar/Num	ber of Basement Garage Openings
4. ESTIMATED COST: LAB	09	MATERIAL	
S. ESTIMATED COMPLETIC	N DATE:		
pplicant Signature:		Date:	

HEATING

CHECK APPROPRIATE BOX

ALL HEATING SOLID FUEL MUST HAVE A COPY OF MFG. INSTALLATION INSTRUCTIONS ATTACHED

DATE RECEIVED		WN OF BATH	(Expires 1 Year From Issue Date
DATE ISSUED			PERMIT NO.
NOTE: ADDITIONAL \$50 FE		UN Cash	
BEFORE BUILDING PERMIT		i.O. Check #	Code Enforcement Officer
1. Code Enforcement Officer 1. BEFORE covering 2. BEFORE footers as 3. WHEN framing is u 4. BEFORE covering 5. BEFORE project is 2. Highway supervisor to be	, (607) 776-6184, M septic system nd/or foundation w p electrical wiring, p used or occupied notified BEFORE in	alls are poured lumbing, and insulation (see <u>NOTE</u> ;)	NOTE: NO PROJECTS TO BE USED OR OCCUPIED UNTIL FINAL INSPECTION AND APPROVAL!
APPLICATION FOR BUILDING	PERMIT (Please p	orint and fill in completely).	
1. PROJECT LOCATION (Included)	de Fire Number & Ro	oad Name):	
2. TAX MAP NUMBER:		− → SIZE O	FLOT:
		s name:	
3. LAND OWNER'S NAME:		Phone: (Home)	(Other)
4 APPLICANT'S NAME:		Phone: (Home)	(Other)
SAPPLICANT'S MAILING ADDR	ESS:		
6. CONTRACTOR'S NAME:		Phone: (home)	(Other)
		skelch or blue print - see graph o	
B. BUILDING TO BE	ft. wide by	ft.long/	stories/square. It
Nature of work (check ALL that New Structure	t are applicable) Septic System		e Homex
☐ Addition			lar Home xx
		(If Manufactured Home, Fill	
		SERI	AL NO.
* New 1 Used YE	AR BUILT	MODEL	
10. HEATING: Heat Type:	Hot Air,	Hot Water/Steam,	Electric, Other
Fuel Type:	None, Gas,	Electric, Oil,	Wood, Coal, Solar
1. CENTRAL AIR CONDITIONIN	NG; 🗆 Yes 🗆 No	11. FIREPLA	CE: O Yes O No
3. CHECK ONE: U Slab	Crawl Space	☐ Basement/Cellar/Num	ber of Basement Garage Openings
4. ESTIMATED COST: LABOR		MATERIAL	
5. ESTIMATED COMPLETION (DATE:		
Applicant Signature:		Date:	

CENTRAL AIR
CONDITIONING

SELECT APPROPRIATE BOX

LINE #11B

FIREPLACE

SELECT APPROPRIATE BOX

ALL AIR CONDITIONING UNITS AND FIREPLACES REQUIRE MFG. INSTALLATION INSTRUCTIONS

(Expires 1 Year From Issue Date) DATE RECEIVED DATE ISSUED FEE FORM OF PAYMENT: PERMIT NO. -Cash ____ NOTE: ADDITIONAL \$50 FEE FOR WORK BEGUN BEFORE BUILDING PERMIT IS ISSUED BY C.E.O. Check # Code Enforcement Officer 1. Code Enforcement Officer, (607) 776-6184, MUST be notified: 1. BEFORE covering septic system NOTE: NO PROJECTS TO 2. BEFORE footers and/or foundation walls are poured BE USED OR OCCUPIED 3. WHEN framing is up 4. BEFORE covering electrical wiring, plumbing, and insulation ______ UNTIL FINAL INSPECTION 5. BEFORE project is used or occupied (see NOTE:) AND APPROVAL! 2. Highway supervisor to be notified BEFORE installing driveway. 3. A fire number must be obtained from the 9-1-1 Enhanced Department. PLEASE COMPLETE ATTACHED FORM! APPLICATION FOR BUILDING PERMIT (Please print and fill in completely). 1. PROJECT LOCATION (Include Fire Number & Road Name): 2. TAX MAP NUMBER: _____ SIZE OF LOT: _____ Subdivision: Yes No If YES, previous owner's name: 3. LAND OWNER'S NAME: Phone: (Home) ____ (Other) ___ Phone: (Home) (Other) 4.APPLICANT'S NAME: 5.APPLICANT'S MAILING ADDRESS: ____ 6. CONTRACTOR'S NAME: Phone: (home) (Other) 7. PROJECT DESCRIPTION: (please include DETAILED sketch or blue print - see graph on 2nd form) 8. BUILDING TO BE ft. wide by ft.long/ stories/ 9. Nature of work (check ALL that are applicable) ☐ New Structure ☐ Septic System • ☐ Set Manufactured Mobile Home x ☐ Addition ☐ Demolition •☐ Set Manufactured Modular Home x • (If Manufactured Home, Fill In Below) ☐ Alteration ☐ Other * NAME OF MANUFACTURER SERIAL NO. * New Used YEAR BUILT MODEL 10. HEATING: Heat Type: Hot Air, hlot Water/Steam, Electric, Other Fuel Type: None, Gas, Electric, Oil, Wood, Coal, 11. CENTRAL AIR CONDITIONING: ☐ Yes ☐ No 11. FIREPLACE: ☐ Yes ☐ No 13. CHECK ONE: U Slab U Crawl Space D Basement/Cellat/ Number of Basement Garage Openings 14. ESTIMATED COST: LABOR MATERIAL 15. ESTIMATED COMPLETION DATE: Applicant Signature:

CHECK ONE

SELECT APPROPRIATE BOX FOR THE TYPE OF FOUNDATION

DATE RECEIVED		N OF BATH	(Expires 1 Year From Is	sue Date)
DATE ISSUED	FEE/_	FORM OF PAYMENT:	PERMIT NO	
NOTE: ADDITIONAL \$50 FEE				
BEFORE BUILDING PERMIT IS	ISSUED BY C.E.O.	Check #	Code Enforcement	Officer
	eptic system for foundation walls ectrical wiring, plum sed or occupied (se stified BEFORE insta	are poured bing, and insulation NOTE;) alling driveway.	NOTE: NO PROJECT BE USED OR OCCU UNTIL FINAL INSPEC AND APPROVAL	PIED CTION .!
APPLICATION FOR BUILDING P	ERMIT (Please prin	t and fill in completely).		
1. PROJECT LOCATION (Include	Fire Number & Road	Name):		
2. TAX MAP NUMBER:		size o	FLOT:	
Subdivision: Tyes The If YES				
3. LAND OWNER'S NAME:		Phone: (Home)	(Other)	
APPLICANTS NAME:		Phone: (Home)	(Other)	
APPLICANT'S MAILING ADDRE	SS:			
S. CONTRACTOR'S NAME:		Phone: (home)	(Other)	
PROJECT DESCRIPTION:		Use:		
(please in	iclude DETAILED ska	Ich or blue print - see graph o	n 2nd form)	
BUILDING TO BE	ft. wide by	tt.long/	stories/	square. ft.
Q Addition Q	Septic System Demolition	Set Manufactured Mobil Set Manufactured Modu (If Manufactured Home, File	lar Homex	
* NAME OF MANUFACTU	RER	\$ERI	AL NO.	
O New O Used YEAR	R BUILT M	ODEL		
0. HEATING: Heat Type:	Hot Air,	Hot Water/Steam,	Electric,	Other
		Electric, Oil,		
1. CENTRAL AIR CONDITIONING	S: O Yes O No	11. FIREPLA	CE: Yes No	
3. CHECK ONE: U Slab	Crawl Space	Basement/Cellar/Num	ber of Basement Garage Op	enings
4. ESTIMATED COST: LABOR_	W	ATERIAL		
5. ESTIMATED COMPLETION DA	ATE:			
noticent Signature		N-4-		

ESTIMATED COST

ENTER THE ESTIMATED
COST FOR LABOR AND
MATERIAL SEPARATLY

IF COST DOES NOT SEEM VIABLE (TOO LOW) ESTIMATES MAY BE SET BY THE ASSESSOR'S OFFICE

DATE RECEIVED		N OF BATH DING PERMIT	(Expires 1 Year Fro	m Issue Date)
DATE ISSUED			PERMIT NO.	
NOTE: ADDITIONAL \$50 FEE F				
BEFORE BUILDING PERMIT IS	ISSUED BY C.E.O	Check #	Code Enforcem	nent Officer
1. Code Enforcement Officer, (6)	NAVAS SHOV VIIIC	T ha natified		
BEFORE covering sep BEFORE footers and/o WHEN framing is up	otic system or foundation wall ctrical wiring, plun ed or occupied (so ified BEFORE inst	s are poured abling, and insulation to NOTE;	NOTE: NO PROJE BE USED OR OC UNTIL FINAL INSE AND APPRO	CCUPIED PECTION VAL!
APPLICATION FOR BUILDING PE	RMIT (Please prin	nt and fill in completely).		
1. PROJECT LOCATION (Include F	ire Number & Road	Name):		
2. TAX MAP NUMBER:	-	• SIZE O	FIOT	
Subdivision: Q Yes Q No If YES				

3. LAND OWNER'S NAME:		Phone: (Home)	(Other)	
4.APPLICANT'S NAME:		Phone: (Home)	(Other)	
5.APPLICANT'S MAILING ADDRES	Š:			
6. CONTRACTOR'S NAME:		Phone: (home)	(Other)	
7. PROJECT DESCRIPTION:		Use:		
(please inc	dude DETAILED ski	elch or blue print - see graph o		
8. BUILDING TO BE	_ft. wide by	tt.long/	stories/	square. ft.
	Septic System Demolition Other	□ Set Manufactured Mobil □ Set Manufactured Modu (If Manufactured Home, Fit	lar Homex	
· O New O Used YEAR	BUILT M	ODEL		
10. HEATING: Heat Type:	Hot Air,	Flot Water/Sleam,	Electric.	Other
		Electric, Oil,		
11. CENTRAL AIR CONDITIONING:				
3. CHECK ONE: U Slab U				e Openinos
14. ESTIMATED COST: LABOR_				· Optimilya
5. ESTIMATED COMPLETION DAT				
Applicant Signature:				

ESTIMATED COMPLETION DATE

MAXIUM TIME
ALLOWED IS ONE
YEAR FROM DATE OF
APPLICATION

IF OVER ONE YEAR A
NEW BUILDING
PERMIT IS REQUIRED

TOWN OF BATH
BUILDING PERMIT (Expires 1 Year From Issue Date) DATE RECEIVED FEE /_ DATE ISSUED FORM OF PAYMENT: PERMIT NO. Cash _____ NOTE: ADDITIONAL \$50 FEE FOR WORK BEGUN BEFORE BUILDING PERMIT IS ISSUED BY C.E.O. | Check # Code Enforcement Officer ************************ 1. Code Enforcement Officer, (607) 776-6184, MUST be notified: 1. BEFORE covering septic system **NOTE:** NO PROJECTS TO 2. BEFORE footers and/or foundation walls are poured BE USED OR OCCUPIED 3. WHEN framing is up 4. BEFORE covering electrical wiring, plumbing, and insulation 💢 UNTIL FINAL INSPECTION 5. BEFORE project is used or occupied (see NOTE.) AND APPROVAL! 2. Highway supervisor to be notified BEFORE installing driveway. 3. A fire number must be obtained from the 9-1-1 Enhanced Department. PLEASE COMPLETE ATTACHED FORM! APPLICATION FOR BUILDING PERMIT (Please print and fill in completely). PROJECT LOCATION (Include Fire Number & Road Name): 2. TAX MAP NUMBER: • SIZE OF LOT: Subdivision: Yes No If YES, previous owner's name: Phone: (Home) 3. LAND OWNER'S NAME: ____ (Other) ___ Phone: (Home) 4.APPLICANT'S NAME: (Other) 5.APPLICANT'S MAILING ADDRESS: 8. CONTRACTOR'S NAME: Phone: (home) (Other) 7. PROJECT DESCRIPTION: (please include DETAILED sketch or blue print - see graph on 2nd form) 8. BUILDING TO BE ft. wide by tt.long/ stories/ square. ft. 9. Nature of work (check ALL that are applicable) ☐ New Structure ☐ Septic System . ☐ Set Manufactured Mobile Home x ☐ Addition ☐ Demolition • ☐ Set Manufactured Modular Home x Other ☐ Alteration (If Manufactured Home, Fill In Below) * NAME OF MANUFACTURER SERIAL NO. * New Used YEAR BUILT MODEL 10. HEATING: Heat Type: _____ Hot Air, _____ Hot Water/Steam, ____ Electric, ____ Other Fuel Type: None, Gas, Electric, Oil, Wood, Coal, 11. CENTRAL AIR CONDITIONING: ☐ Yes ☐ No 11. FIREPLACE: ☐ Yes ☐ No 13. CHECK ONE: U Slab U Crawl Space D Basement/Cellar/___Number of Basement Garage Openings 14. ESTIMATED COST: LABOR MATERIAL 15. ESTIMATED COMPLETION DATE:

Applicant Signature:

REMEMBER TO SIGN AND DATE YOUR TOWN OF BATH BUILDING PERMIT APPLICATION

