

CITY OF SALAMANCA
BUILDING AND ZONING PERMIT APPLICATION

THIS APPLICATION MUST BE COMPLETED IN FULL

Date of Application:		Application Number:	
Total Fee:		Receipt Number:	
Date of Permit:		Permit Number:	
Contractor's Name:		Tax Map Number:	
Property Address:			
Property Owner:			
Owner's Address:			
Phone Number:		Estimated Project Cost:	
Description of Proposed Project:			
UPON COMPLETION OF THIS PROJECT, A FINAL INSPECTION WILL BE MADE. ONCE A CERTIFICATE OF OCCUPANCY/COMPLETION IS ISSUED, ONLY THEN CAN THIS PROJECT BE USED OR OCCUPIED.			
Deponent being duly sworn, says that he is the owner or authorized agent for which the foregoing work is proposed to be done, and that he is duly authorized to perform such work, and that all workmen employed on the project are covered by contract or compensation insurance, and that all work will be performed in accordance with all existing state laws and local ordinances. The issuance of a permit shall in no way be deemed to be a determination by the City of Salamanca as to the ownership of the improvements of said premises.			
Applicant's Signature:			Date:
Sworn to this _____ day of _____, 20__			
_____ Notary Public			
Zoning/Code Enforcement Officer:			Date:
Approved:	Disapproved:	Reason:	
Date:	Date:		
Variance:	If yes, explain:		

NOTE - ANY PLUMBING WORK MUST BE DONE BY EITHER A CITY LICENSED PLUMBER, THE RESIDENT HOME OWNER OR A MASTER PLUMBER WHO APPLIES FOR AN OUT OF TOWN PLUMBING PERMIT