

Application No. \_\_\_\_\_

**TOWN OF CLAYTON  
FIRE PREVENTION AND BUILDING CODE OFFICE  
405 Riverside Drive  
Clayton, N.Y 13624  
(315) 686-3512 Ext 29**

**APPLICATION FOR BUILDING PERMIT  
Please Print or Type**

\_\_\_\_\_  
**TO BE COMPLETED BY APPLICANT**

Town of: \_\_\_\_\_

Town Clerk: \_\_\_\_\_ Tax Map No: \_\_\_\_\_

Name of Owner: \_\_\_\_\_ Phone: (    ) \_\_\_\_\_

Job Site (911 Address Required): \_\_\_\_\_

Name of Applicant / Contractor: \_\_\_\_\_

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

Architect / P.E (If applicable) Name: \_\_\_\_\_

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

<input type="checkbox"/> <b>New Construction:-----&gt;</b>	<input type="checkbox"/> <b>Residential</b>	<input type="checkbox"/> <b>Commercial</b>
<input type="checkbox"/> <b>Renovation, Alteration, Conversions:-----&gt;</b>	<input type="checkbox"/> <b>Residential</b>	<input type="checkbox"/> <b>Commercial</b>
<input type="checkbox"/> <b>Installation of:-----&gt;</b>	<input type="checkbox"/> <b>Manufactured Home</b>	<input type="checkbox"/> <b>Modular Home</b>
<input type="checkbox"/> <b>Installation of Heating Devices:      Specify:    Type &amp; Fuel</b> _____		
<input type="checkbox"/> <b>Septic:-----&gt;</b>	<input type="checkbox"/> <b>New Installation</b>	<input type="checkbox"/> <b>Renovation</b>
<input type="checkbox"/> <b>Swimming Pool:-----&gt;</b>	<input type="checkbox"/> <b>Above – Ground</b>	<input type="checkbox"/> <b>In – Ground</b>

**Project Description and Size** \_\_\_\_\_

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

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Applicants Signature**

**TO BE COMPLETED BY CODE ENFORCEMENT OFFICER**

Permit No: \_\_\_\_\_ Issued On: \_\_\_\_\_ Expires \_\_\_\_\_

Occupied As: \_\_\_\_\_ Occupancy Classification: \_\_\_\_\_

Construction Value: \_\_\_\_\_

Fee Total \$ \_\_\_\_\_ Date Paid: \_\_\_\_\_

Check No: \_\_\_\_\_ Money Order \_\_\_\_\_ Cash: \_\_\_\_\_

\_\_\_\_\_  
**CODE ENFORCEMENT OFFICER**