

# Town of Cheektowaga Building Permit Application

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

Assigned Inspector \_\_\_\_\_

Today's Date: \_\_\_\_\_

plans filed:  yes  no

**Job Address:** \_\_\_\_\_, Suite No: \_\_\_\_\_

Property Owner's Name : \_\_\_\_\_

Property Owners Phone No. : \_\_\_\_\_

**Applicant's Name:** \_\_\_\_\_

Applicant's Mailing Address \_\_\_\_\_

\_\_\_\_\_

Tel. No. \_\_\_\_\_ Email: \_\_\_\_\_

**Building Contractor's Name:** \_\_\_\_\_

*(if homeowner will be the contractor please also complete the reverse side of this form)*

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

\_\_\_\_\_

Field Tel. No./ Cell \_\_\_\_\_ Email: \_\_\_\_\_

**Plumbing Contractor's Name:** \_\_\_\_\_

## Description of Work

Residential  Commercial  Plumbing  Fire  Signs  Other

Please describe your work \_\_\_\_\_

\_\_\_\_\_

**Estimated Value of Construction** \$ \_\_\_\_\_ .00

*(The Town of Cheektowaga "cost of construction table" will be used when costs provided are erroneous)*

## Owner / Agent Certification

I certify that I am the owner of record or have the permission of the owner of record to perform the work herein; and that all of the information provided as part of this application is correct and true.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature