

VILLAGE OF GREAT NECK PLAZA, INC.
GUSSACK PLAZA, PO BOX 440, GREAT NECK, NY 11022
516/482-4500 FAX 516/482-3503

Permit No.

APPLICATION FOR BUILDING PERMIT

TO BE MADE OUT IN DUPLICATE, in ink and accompanied by survey and plot plan showing existing and proposed buildings with area of each and of the whole, drawing to scale and typewritten specifications, all in duplicate

The Workmen's Compensation Law requires a Certificate of Insurance approved by the Industrial Commissioner filed with this application and a General Liability Certificate.

Application is hereby made to the Village of Great Neck Plaza, for the approval of the detailed statement and plans herewith submitted for the construction, removal or demolition of the buildings, additions or alteration herein described.

New Building [] Alteration [] Addition [] Accessory Building [] Demolition []

Address _____

Section _____ Block _____ Lot(s) _____

Name of Insurance Company _____ (Attach Insurance Certificates)

Workmen's Compensation Policy No. _____ Expiration Date _____

Estimated cost \$ _____ Number of stories _____ Height _____ feet.

Description of work to be done _____

Nature of occupancy of each story _____

How are other buildings on lot occupied? _____

Present building area _____ Area of proposed building _____

Name and address of property owner _____

_____ Tel: _____

Name and address of architect _____

_____ Tel: _____

Name and address of builder _____

_____ Tel: _____

ATTACH PHOTOCOPY OF NASSAU COUNTY HOME IMPROVEMENT LICENSE.

STATE OF NEW YORK {
COUNTY OF NASSAU { ss

_____ being duly sworn says that h is the
_____ of the property herein described. That all statements
(owner - agent)

made in this application are true to the best of h knowledge and belief.

Sworn to before me this _____ day of _____ 20

Notary

Signature of Applicant

Note: If the applicant is other than the property owner, a notarized letter of authorization from the owner naming the applicant, architect or contractor as agent must accompany this application.

**FOR DEPT. USE
REASON FOR DISAPPROVAL**

FOR DEPT. USE

Note: Work must start within 3 months and be completed in 1 year from date
or permit will be canceled.