

TOWN OF SAUGERTIES
DEPARTMENT OF SAFETY AND BUILDINGS



4 High Street
Saugerties, NY 12477

Tel. (845) 246-2800
Fax. (845) 246-0461

AMENDMENT TO APPLICATION FOR BUILDING PERMIT

Name _____ Address _____

Permit No. _____ Dated _____

Location _____ Fee _____

Brief Outline _____

Section _____ Block _____ Lot _____ Zone _____

To the Department of Safety and Buildings:

Application is hereby made for the approval of the following amendment to the plans and specifications filed with the above-numbered permit and subject to all the conditions, agreements and statements contained in the application and permit.

Amendment Sketch

Approved _____

Disapproved _____

Date _____