



VILLAGE OF COLONIE

VILLAGE HALL
2 THUNDER ROAD
COLONIE, NY 12205
(518) 869-7562 FAX (518) 464-0389
THOMAS J. TOBIN, MAYOR

smesurvey@colonievillage.org
www.colonievillage.org

EDWARD SIM
DEPUTY MAYOR

PATTY SCHWARZ LOCKART
TRUSTEE
JAMES M. RUBINO
TRUSTEE
ART WHITE
TRUSTEE

JAMIE BLOT
CLERK

BUILDING PERMIT APPLICATION **SOLAR PANELS**

1. **PROPERTY OWNER:** _____

2. **OWNER'S ADDRESS:** _____

3. **PROPERTY LOCATION:** _____

4. **LOT SIZE:** WIDTH _____ FT. DEPTH _____ FT. AREA _____ SQ. FT.

5. **DESCRIPTION OF PROPOSED PROJECT:** _____

6. **PRINCIPAL BUILDINGS:**

MAXIMUM HEIGHT: _____ FT. MAXIMUM WIDTH: _____ FT.

MAXIMUM DEPTH: _____ FT.

7. **CONSTRUCTION TYPE: (CIRCLE ONE)**

NEW CONSTRUCTION ADDITION ALTERATION RECONSTRUCTION
IF OTHER (PLEASE DESCRIBE): _____

8. **ESTIMATED COST OF CONSTRUCTION:** \$ _____

9. **NUMBER OF PANELS:** _____ **LOCATION OF PANELS:** _____

10. **IS BUILDING ERECTED ON CORNER LOT?** YES / NO (circle one) _____

I hereby apply under the Building Code of the Village of Colonie for a permit to construct, reconstruct or alter a building as set forth above, and I certify that the statements herein contained are true to the best of my knowledge and belief and conform to all Codes of the Village of Colonie.

Signature of Application: _____ **Telephone #:** _____
Owner/Owner's Agent

Contractor: _____ **Telephone #:** _____

Contractor's Address: _____ **Date:** _____

I CERTIFY THAT I WILL CONTACT THE BUILDING DEPARTMENT UPON PROJECT COMPLETION TO SCHEDULE A FINAL INSPECTION. A CERTIFICATE OF OCCUPANCY OR COMPLETION CERTIFICATE MUST BE ISSUED UPON COMPLETION. Please initial: _____

[FOR OFFICIAL USE ONLY]

Date: _____ Approved by: _____ PERMIT FEE: \$ _____