

Building Permit New Home Construction

<u>General</u>			
Applicant (Company) Name:			
Contact Person:			
Property Owner's Name:			
Duan anti- Addinagas			
Lot # (If Applicable)			
List another application form (s) submitted	for this project with approval dates:		
Form			
Form			
Estimated cost of Construction \$			
Building Permit #:Tota	Il Payment amount due: \$		
	•		
HOA Approval (Heritage Shores Only) (Yes	s, no, N/A) Please provide approval docur	nents	
Town Signature			
Floodplain Review:			
Town Signature			
Comments:			
Wellhead Protection Area Review:			
Town Signature			
Comments:			
Permit Item	Fee		
Building Permit Cost (% of Est. Cost.)	\$		
Connection Fee	\$		
Water Impact Fee	\$		
Meter Pit	\$		
Water Tapping	\$		
Water Meter	\$		
Library Fund	\$		
Fire/EM Fund	\$		
EM #2	\$		
C/O	\$		
Zoning	\$		
Delinquent Charges (Clean Hands Policy)	\$		
TOTAL	\$		
Received by:	Date Received:		
Town Signature:	Date Issued by the Town		

Zoning Certification

Was a variance(s) requested?	For:
(Yes or no)	
If yes, include approved Application Form 4 wi	th this application.
Was a conditional use approval required?	For:
(Yes If yes, include approved Application Form 4 wi	or no) th this application.
Applicant must provide a plan of the site showing to and any existing building or structures. The plan meconnections, septic tanks, wells, parking, and othe	
Type of Improvement:	
New Building	
Sq. Feet New	
Addition to Building	
Sq. Feet Existing Building	
Sq. Feet Added to Building	
Alteration	
Percentage of Building Altered	
Full Building Demolition	
Sq. Feet Building	
Partial Build Demolition	
Sq. Feet Existing Building	
Sq. Feet to be demolished	
Water Connection (provide location	
+ Sign Request (must comply with	h Ch. 234-Art. 18)
Residential	
Non-residential	
Off-Premises Sign	
Exempt	
+ Sign request must include the information that is	
with Town Code Chapter 234, Article 18, Section 76 Sign Type) to 65.
Freestanding	
Wall	
Find Entrance of Developments	
Entrance of Public Facilities/ Place	ces of Assembly
Proposed Use of Each Structure:	555 517 1555111519
One Family Housing	Multiple Family Housing
Number of Families per building	Apartment
Townhouse	Condominium
Other	Residential Garage/Carport
Other Residential- Specify Use	
Non-Residential- Specify Use	
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Setbacks from Property Line	Required	Provided			
Back:					
R Side:					
L Side:					
Maximum Height of Structure(s): Number of off-Street Parking Spac Water Connection or Well: Storm water Management provided sp		-			
Date of Zoning Approval by Town:					
Signature.		in by Town)			
Building Permit					
Principal Type of Structure: Masonry (Wall Bearing)Wood Frame Structural Steel					
	Reinforced Co				
Type of Construction:	Other – Speci Built on Site	fy	_		
I	Modular and [Delivered to Site			
		fy	_		
*Structure Details; fill out all below	tnat applied to	o Application:			
Dimensions in Feet:					
Principal Type of Heating System: Principal Type of A/C System:					
Type of Foundation for Structure:					
Type of Siding:	Туре с	of Roofing:			
Type of Driveway/Access Finish: Size of Porch and Deck, if included: Size of Garage, if included: Size of the pool, if included: *Floor plans and sections shall	l:				
Comment/Added Information: _					
- -					
lı	nclude additiona	Il sheets if needed.			

Occupancy Permit

The application must receive a Sussex County Permit before construction of any temporary or permanent structures. Sussex County will provide the inspection of structures during construction. This application must be complete with all required information. The applicant will provide the Sussex County Certificate of Occupancy to the Town when received. Town Occupancy Permit will not be issued until the Sussex County Permit is received.

Applicant Signature

The applicant and property owner	understands that all	certifications on	Form 1, Ir	nitial Project
Review Application, continue to ap	ply.			

Signature of applicant(s): _.	
Print Name(s):	
Date Signed:	
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