

# APPLICATION FOR PERMIT AMENDMENT OR RENEWAL

*Office Use Only*  
PERMIT NO. \_\_\_\_\_

**CODE ENFORCEMENT OFFICE**  
**6 SOUTH PARK STREET**  
**CLYDE, NY 14433**

*Office Use Only*  
PERMIT FEE: \_\_\_\_\_

**(315) 923-3971 (Village of Clyde)**

**(315) 923-7259 (Town of Galen)**

Name of Applicant: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Applicant's Phone #: \_\_\_\_\_

I, the above named Applicant, hereby apply for (circle one): *amendment* *renewal*

of Building Permit No. \_\_\_\_\_, to perform work at \_\_\_\_\_

(address)

\_\_\_\_\_, as described below:

**BRIEF DESCRIPTION OF ORIGINAL PROJECT:**

\_\_\_\_\_  
\_\_\_\_\_

**IF THERE ARE ANY CHANGES TO THE ORIGINAL APPROVED PLANS, PLEASE DESCRIBE BELOW (use attachment if necessary):**

\_\_\_\_\_  
\_\_\_\_\_

**TOTAL COST OF ADDITIONAL WORK (if any): \$ \_\_\_\_\_ (See Note Below)**

*Total cost includes all structural, electrical, plumbing, mechanical, interior finish and normal site preparation. If no cost is given, the cost will be estimated for you.*

*I hereby affirm that I have full legal capacity to authorize the filing of this application and that all information and exhibits herewith submitted are true and correct to the best of my knowledge. The undersigned invites representatives of the Village of Clyde and / or Town of Galen to make reasonable inspections and investigation of the subject property during the period of construction. The undersigned understands that the granting of a permit does not authorize violation of any state or local law.*

**APPLICANT SIGNATURE: X \_\_\_\_\_ DATE: \_\_\_\_\_**

OFFICE USE ONLY  
APPROVED BY: \_\_\_\_\_ APPROVAL DATE: \_\_\_\_\_

**COPIES TO:      Applicant      Assessor      Code Enforcement Officer      File**