

DEMOLITION PERMIT APPLICATION TOWN OF CLINTON 1215 Centre Road, Rhinebeck NY 12572 (845-266-5704)

GRID#	BUILDING PERMIT # (for office u
	ZONING DISTRICT
	•
Name of Applicant:	·
Daytime Telephone Number:	
Does Project Require Board Approval? YE	S NO If yes which Board?
•	Date Granted:
Is the Property currently in the Applicants'	Name? YES NO (Circle One)
If the answer is No, consent	of Authorization to Act is Required)
NATURE OF PROPOSED WORK	•
New Construction ofPrincipa	al Building orAccessory Structure
Addition to principal Building or_	Accessory Structure
Demolition of Structure-type:	incipal Building or Accessory Structure
Renovation/Conversion of Pri	ncipal Building or Accessory Structure
SIZE OF PROPOSED CONSTRUCTION:	for Cida Di
SETBACKS: Front_ft. Rearft. Side_	n. Side_Ft.
HEIGHT:ft. Number of Stories:	7.
ABCHERROT OF ENGINEER OF DECORE	<:
ARCHITECT OR ENGINEER OF RECORD	
Address and Telephone:	
PRIME CONTRACTOR/BUILDER:	
Address and Telephone:	
SITE INFORMATION	•
Number of Existing Structures:	
Is the lot a pre-existing non-conforming lof.	/
Describe non-conformity	
Present Address:	
Is the site within a flood plain?	
Is the site within a protected wetland?	
ESTIMATED COST:	and the second of the second o
SIGNATURE OF APPLICANT:	(See *)
DATE RECEIVED:FEE PAID:.	
	VEDDENIED-REASON:
· .	
BUILDING INSPECTOR	ZONING ENFORCEMENT OFFICER

Form Revised: 10/2005