

TOWN OF GLENVILLE
18 Glenridge Road, NY 12302-4518
(518) 688-1200, Ext. 405 ~ Fax (518) 384-0140
www.townofglenville.org

**APPLICATION FOR
SHED ~ DETACHED GARAGE ~ ACCESSORY STRUCTURE**

*****A Detailed Plot Plan and Construction Plans Are Required To Be Submitted With This Application***
*** See Supplemental Information for Additional Information***.**

Date _____

1) Building Site Address _____

2) Work Applied For (check one)
Any structure 14' X 20' and/or 280 s/f or larger and/or used to store a motor vehicle
is considered a garage for zoning purposes.

___Garage (280 s/f or larger) Size _____ Height _____ ft.
___Storage Shed (279 s/f or smaller) Size _____ Height _____ ft.
___Other Accessory Structure (describe) _____ Size _____ Height _____

Type of Foundation for Structure _____

3) Property Owner's Name _____ Phone _____

Mailing Address (if different than site address) _____

City _____ State _____ Zip _____

4) Contractor's Name (if applicable) _____ Phone _____
(All contractors must provide poof of Workers Compensation and Disability Insurance)

Address _____ City _____ State _____ Zip _____

5) Site Information (The following information must be provided along with a detailed plot plan)

Is this a corner lot? Yes _____ No _____

Dimensions of lot _____ Dimensions of dwelling on lot _____

List all other accessory structures on the property. All accessory structures must be shown on the plot plan.

Shed(s): Size _____ Deck: Size _____

Swimming Pool: Size _____ Other: Size _____

6) Estimated Value Of All Work (labor and materials) \$ _____

7) Signature Of Property Owner _____

I certify that the construction plans and all other information submitted as part of this permit application are accurate.
(Contractor signature accepted with a copy of the signed agreement with the property owner)

FOR OFFICE USE ONLY:

Date Approved: _____ Fee: _____ Date Denied: _____

Authorized Signature: _____

Notes or Comments: _____