

Town of Caroga Building Permit Application

Owner Information:

Name: Arthur M Forgue
Mailing Address: 32 Rolling Brook DR
City, State, Zip Code: CLIFTON Park N.Y 12065
Telephone: 518-573-6411
Email: A.Forgue@NYCOP.RR.com

Contractor Information:

Name: NA
Address: _____
City, State, Zip Code: Lane Pine Storage Sheds
Telephone: Building OFF site
Insurance Information: _____

Location of Property:

Address (911#): 195 E Shore Rd
SBL #: 83.6-10-29

Are there any right of ways associated with this property? Yes or No
Are there any wetlands on this property? Yes or No

Description of Project:

Having shed BUILT OFF-SITE and delivered To
195 E Shore Rd

** Most Projects require measurements from property lines.

Drawings Attached

Estimated Value of Project: 3400.00

Code Enforcement Office will fill in information below.

Permit Type Accessory Structure

Denied/Approved _____

Date of Approval _____

Permit Fee \$100.00

Paid by Cash or Check # _____

*pd
Planning
fee
\$100.00*