

Town of Caroga Building Permit Application

Owner Information:

Name: Michele Shaver
Mailing Address: 40 Temple Ave
City, State, Zip Code: Winthrop, MA 02152
Telephone: _____
Email: m_shaver@hotmail.com

Contractor Information:

Name: Bunk Barn, Inc
Address: P.O. Box 3
City, State, Zip Code: Amsterdam NY 12010
Telephone: 518-424-0072
Insurance Information: _____

Location of Property:

Address (911#): 189 N Shore Rd W Stoner
SBL #: 24. 6-1-2

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:

Delivery of pre-built shed, 10 ft x 14 ft. x 11 ft. height
Shed will be placed on existing brick concrete slab
There will be no electric or water in the shed
Estimate that shed will be located approx 100 ft from the border of our
property and our neighbor to the West; 90 ft. from the border with our neighbor
to the East; 140 ft. from the water; and approx 150 ft. from the road

** Most Projects require measurements from property lines.

Drawings Attached

Estimated Value of Project: \$ 3500.00

Permit Type Accessory Structure

Code Enforcement Office will fill in information below.

Denied/Approved IB

Date of Approval _____

Permit Fee _____

Paid by Cash or Check # _____

100 planning fee
V#4037 9.21.2
100 permit fee