

Incorporated Village Of Lawrence

196 Central Ave Lawrence NY 11559

516-239-3987

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Building Department

Board of Building Design

Application

Dept Use ONLY

Application # _____

Submission Date _____

Date: _____

Section: _____ Block: _____ Lot: _____

Address: _____

Description of Work: _____

Owner Information

Will Attend Meeting

Name: _____ Email: _____

Address: _____ City: _____ St: _____ Zip: _____

Telephone Number _____

Architect/Designer Information

Will Attend Meeting

Name: _____ Email: _____

Address: _____ City: _____ St: _____ Zip: _____

Telephone Number _____

Contractor Information

Will Attend Meeting

Name: _____ Email: _____

Address: _____ City: _____ St: _____ Zip: _____

Telephone Number _____

Building requesting approval

Occupancy: One-family or two-family residence Multiple residences Commercial

Scope of work: New work Alteration Addition

Requesting approval for the following:

Building design Fence Curb cut Sign design

Other: _____

State of New York

County of Nassau

Village of Lawrence

Notary Signature & Stamp:

The undersigned (Print Name) _____ being duly sworn, says that the statements contained in this application, together with the plans and specifications submitted, are a true and complete statement of all proposed work to be done on the described premise and that all provisions of the applicable ZONING ORDINANCE, BUILDING ADMINISTRATIVE ORDINANCE, BUILDING CONSTRUCTION CODE AND ANY APPLICABLE FEDERAL, STATE AND COUNTY REQUIREMENTS pertaining to the proposed work shall be complied with, whether specified or not and that such work is authorized by the owner.

Sworn to before me this _____ day of _____ 20 _____

Signature of Owner, Owner's Agent, Architect, Contractor

(Circle one)

ALL FEES ARE NON REFUNDABLE