TOWN OF HANOVER

DEPARTMENT OF CODE ENFORCEMENT 68 Hanover Street, SILVER CREEK, N.Y. 14136

PHONE: (716) 401-2765 FAX: (716) 934-7991 Email: DanielHogg@hanoverny.com

BEFORE THE USE / USES DESCRIBED
IN THIS APPLICATION CAN BE
IMPLEMENTED A **CERTIFICATE OF COMPLIANCE** MUST BE OBTAINED.

TO BE FILLED OUT BY BUILDING INSPECTOR PERMIT NO._____ HAMLET/VILLAGE_____ PERMIT DATE: PERMIT EXPIRES: ZONING DIST. _____ VALUE OF WORK: ____ APPROVED BY: PERMIT FEE: \$ □ VARIANCE REQUIRED □ GRANTED □ DENIED DATE_ **N.O.D.** FENCE PERMIT OWNER:_____ ADDRESS: ____ PHONE LOCATION TAX ID: SECTION _____ BLOCK ____ LOT ____ NAME OF BUILDER: ADDRESS: PHONE: CERTIFICATE OF INSURANCE ON FILE

DIG SAFELY NEW YORK 1-800-962-7962 IT'S THE LAW CALL BEFORE YOU DIG

CERTIFICATE OF INSURANCE NEEDED

NO BUILDING PERMITS WILL BE ISSUED PRIOR TO APPROVAL OF A SEWER HOOK-UP PERMIT FROM THE CHAUTAUQUA COUNTY HEALTH DEPARTMENT OR WHERE APPLICABLE FROM THE TOWN / VILLAGE WATER AND SEWER DEPARTMENTS. NO EXCEPTIONS!

TYPE OF F	ENCE:			
WOOD		SOLID	STOCKADE	
METAL		CHAIN LINK [PVC	
OTHER		Describe:		
HEIGHT: _		LENGTH:		
FRONT YA	RD	SIDE YARD	REAR YARD	
Yard Depth I hereby app of above, also t herein contain	ns (minin ly under hat I am ined are	inimum): FrontFt., (b) Inum): FrontFt., (b) Inum): FrontFt., (b) Inum): Front, New York for aware of my true property true or to the best of my knownt	RearFt. The building Code of the Tale a permit to construct a Fellines, and I certify that the owledge and belief.	ence as set forth ne statements
Address Phone				
Date				
The application of the above stated person (s) is hereby				
☐ Approved, ☐ Disapproved.				
Reasons for disapproval				
Date:			Daniel J. Hogg/ Cod	e Enforcement Officer