



Town of Henrietta
Office of Building and Fire Prevention
 475 Calkins Road
 Henrietta, NY 14467
 PH: (585) 359-7060 FAX: (585) 321-6093
 Building@henrietta.org



One and Two Family Residence Building Permit Application

Project/Site Information

Lot# Subdivision _____
 Address _____
 City, State, Zip _____

Zoning Classification		
<input type="checkbox"/> R-1-15	<input type="checkbox"/> R-1-20	<input type="checkbox"/> R-2-15
<input type="checkbox"/> RR-1	<input type="checkbox"/> RR-2	<input type="checkbox"/> PUD

Tax I.d. Number _____

Property Owner Information

Name _____
 Address _____
 City, State, Zip _____
 Phone # _____
 Email _____

Contractor Information

Company Name _____
 Address _____
 City, State, Zip _____
 Phone # _____
 Contact Name _____
 Email _____
 Site Foreman _____
 Phone # _____

Plumber Information

Company Name _____
 Address _____
 City, State, Zip _____
 Phone # _____
 Contact Name _____
 Email _____
 License Number _____

Required Documentation

- Design Professional Stamped Drawings
- Plumbing, Electrical and HVAC Layout
- Energy Code Compliance Method
- Truss Utilization Placard Form
- Heat Calculations
- Truss Drawings
- Plot Map

Construction Cost \$

1 Set of Plans and an Electronic Copy emailed to jfried@henrietta.org Indicate Lot Number and Subdivision in the Subject Line.

I hereby certify that all work related to this application will be performed in accordance with all applicable town, and state laws and codes pertaining to building construction, and demolition and the information submitted and contained herein is accurate and correct. I further certify that I am the owner or an authorized agent of the property owner listed in this application, and have authority to make application for work to be performed.

Applicants Name (Printed) _____

Applicants Signature _____ **Date** _____

For Official Use

Approval For Permit Issuance

Approved By: _____ Title: _____ Approval Date: _____

Required Inspections: ① ② ③ ④ ⑤ 6 ⑦ ⑧ ⑨ ⑩ Fireplace Electrical

Application # _____

Application Date _____