



VILLAGE OF EAST HILLS

INCORPORATED JUNE 24, 1931

209 Harbor Hill Road, East Hills, New York 11576
Telephone (516) 621-5600 • Fax (516) 625-8736

APPLICATION FOR SHED PERMIT

Project Location: _____

Section: _____ Block: _____ Lot: _____ Date: _____

1. Type of shed: Permanent Temporary
2. Shed material: Wood Plastic Other _____
3. Will shed be installed on a base/slab? Yes No
4. Shed dimensions: _____
5. Is this an application to Legalize & Maintain present status (has work already been started)? Yes No
6. Estimated cost of proposed work (inclusive of labor and materials):
\$ _____
7. Who should be the primary contact for this application?
 Owner Contractor Other _____
8. Owner(s): _____
If owner is a corporation, state name of officer authorized to make this application: _____
Phone #: _____ Email: _____
Mailing Address: _____
9. Contractor (Company Name): _____
Contact Name: _____
Phone #: _____ Email: _____
Business Address: _____
Nassau County Home Improvement License #: _____
 Owner will be installing shed themselves (*must provide a copy of your homeowners insurance*)

Please include with this application:

- 2 copies of property survey showing proposed location & setbacks
- Contractor's License and Liability, Disability and Workers' Compensation Insurances or copy of homeowners insurance
- \$150 Application Fee (cash or check made out to 'The Village of East Hills')

PERMIT EXPIRES ONE YEAR FROM DATE OF ISSUE

See fee schedule for renewals

STATE OF NEW YORK, COUNTY OF NASSAU, ss.: I state that I am the property owner or one of the property owners named in the application, and I certify that the information provided on the application is accurate and the statements are true to the best of my knowledge and belief. I understand and agree that these statements are being relied upon by a municipality; that false statements are perjurious and may result in criminal prosecution; and/or a fine of \$10,000. If there is more than one property owner, I further certify that I am authorized to act on behalf of all owners with respect to the submission of this application, and that they have been informed of all information included in this application as well as its terms and conditions. In submitting this application, I authorize any agents listed on this application to act on my behalf.

I grant permission for Building Department Officials, Zoning Board members, Architectural Review Board members and other agents of the Village to enter onto the property for the purpose of performing any necessary inspections, without prior notice. I agree to comply with all rules and regulations of the Zoning and Building Code, deed restrictions, with every other provision of the law of the Village of East Hills, the Uniform Code of the State of New York, and with every other provision of law relating to the erection or alteration of the building in effect at this date. I further acknowledge that it is the owner's responsibility to close out the permit, and that I may not use spaces granted under this building permit until final inspection is completed, ALL required documents are submitted, (i.e. final survey, etc.), and a Certificate of Completion is obtained.

Owner's Name: _____

Owner's Signature: _____

Sworn to before me this _____ day of _____, 20____

Notary Public, Nassau County, New York

FOR BUILDING DEPARTMENT USE ONLY	
Received: _____	
	Application Fee \$ 150.00 _____
	Building Permit Fee \$ _____
	C of C Fee \$ _____
<input type="checkbox"/> ZBA Required: Approval Date _____	Total \$ _____
Permit No. _____	Date Issued: _____
Certificate of Completion No. _____	Date Issued: _____