

Town of Middlesex
Code Enforcement Office
Phone: **585-554-3607** Fax: **585-554-4615**
1216 Route 245, PO Box 147
Middlesex, NY 14507

Building Permit # _____

Building Permit Application

Applicant _____

Mailing Address _____

Telephone _____ **Email** _____

Property Owner's Written Permission Attached ☐

Property Owner _____

Mailing Address _____

Telephone _____ **Email** _____

Contractor _____

Mailing Address _____

Telephone _____ **Email** _____

Property Address _____

Tax Map # _____ **Zone** _____

Detailed Description of Work:

Estimated Cost of Work \$ _____

Required Insurances:

Contractors and sub-contractors must submit proof of liability, worker's compensation, and disability insurance. If you are a homeowner or contractor who is exempt, you must submit a signed and dated CE-200 Certificate of Attestation of Exemption.

Onsite Wastewater Treatment System Requirements Must Be Met. Please Contact:

Tyler Ohler, Canandaigua Lake Watershed Inspector: 585.396.9716

(Continued)

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Note: By signing below, the Applicant and/or Property Owner acknowledges responsibility for any external consultant fees incurred in connection with this application and agrees to accept and pay these charges.

Applicant's Signature: _____ Date _____

Application Fee: _____ CC/Check # _____ Cash _____ Accepted By _____ Date _____