

COUNTER CHECKLIST FOR SHEDS, WORKSHOPS AND DETACHED GARAGES

| PART 1 - APPLICATION | | PART 2 -- PLANS AND PAPERWORK | |
|---|--|--------------------------------------|--|
| DATE | | | 2 COPIES OF AS-BUILT SURVEY SHOWING |
| PERMIT # | | | LOCATION AND SETBACKS* |
| PROPERTY ADDRESS | | | 2 SETS OF GARAGE PLANS (signed and sealed for |
| SECTION, BLOCK AND LOT | | | garages & workshops w/product approvals) |
| TAX FOLIO # (PARCEL ID #) | | | ENGINEERING FOR PREFAB SHEDS |
| OWNER NAME, ADDRESS AND TEL# | | | |
| CONTR./HOB NAME, ADD., TEL#, AND FAX# | | | SIGNED ACCESSORY USE AFFIDAVIT |
| ENGINEER NAME, ADDR, TELE#, STATE LIC# | | | 2 COPIES RECORDED N.O.C. |
| USE OF BUILDING | | | |
| CLASS OF WORK | | | *if no as-built avail a sealed as-built, formboard , mortgage, or final survey shall be submitted |
| DESCRIP. OF WORK W/SHED MANUFACTURER | | | |
| VALUATION OF WORK | | | |
| SQUARE FOOTAGE | | | |
| TYPE OF CONSTUCTION | | | |
| OCCUPANCY GROUP | | | |
| # OF STORIES | | | |
| RECEIVER | | | |
| PLAN REVIEW AND PERMIT FEES | | | |
| CONTR. COMP CARD #/ STATE LIC# EXP DATE | | | |
| INS./WORKERS COMP (IF STATE LIC. CONT.) | | | |
| NOTARIZED SIGN. OF CONTRACTOR OR HOB | | | |
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Checklist is for Building Department Use Only Additional Documents May Be Required

No General Exceptions Are Allowed. Any Exceptions Must Be Approved On An Individual Basis

By A Supervisor

Additional Notes: