



BUILDING DEPARTMENT
GENERATOR INSTALLATION PERMIT APPLICATION

PERMIT # _____

FEE \$ 90

Application is hereby made for:

NAME OF PROPERTY OWNER: _____

ADDRESS OF PROPERTY: _____

PHONE NUMBER: _____

PURPOSE FOR PERMIT:

DATE OF WORK TO COMMENCE _____ END _____

SCTM# 0907-

Requirements:

- 1. Inspection prior to issuance of permit & upon completion of installation.**
- 2. Electrical inspection certificate**
- 3. License & insurance of contractor building platform (if applicable)**
- 4. License & insurance of company installing generator**

Applicant Name/Signature _____

AUTHORIZING SIGNATURE _____ DATE _____

VILLAGE OF WEST HAMPTON DUNES

PERMIT # _____

Please be advised that The Incorporated Village of West Hampton Dunes has authorized _____ to commence work

Beginning: _____

Ending: _____

AUTHORIZING AGENT: _____ DATE: _____

PLEASE RETAIN BOTTOM PORTION FOR PERMIT VERIFICATION