



TOWN OF SOUTHAMPTON

116 HAMPTON ROAD
SOUTHAMPTON, NY 11968
WWW.SOUTHAMPTONTOWNNY.GOV

DEPARTMENT OF LAND MANAGEMENT
BUILDING AND ZONING DIVISION

JANICE SCHERER

TOWN PLANNING AND
DEVELOPMENT
ADMINISTRATOR

SEAN MCDERMOTT
CHIEF BUILDING INSPECTOR

Telephone 631-287-5700
Fax 631 287-5754

APPLICATION TO AMEND BUILDING PERMIT

Instructions:

1. Fill out the attached application in its entirety.
2. Submit 2 copies (3 for Commercial) of *Amended* building *plans only*.
3. If footprint is being amended, submit 3 copies (5 for Commercial) of survey or site plan reflecting changes.
4. If contractor performing the work is being changed, a notarized letter from the property owner stating the change must be submitted, along with a copy of the new contractor's Workman's Compensation Insurance.
5. Submit amendment fee, in addition to any fees associated with additional work. Please make checks payable to Town of Southampton.
6. Plumbing Application for any additional plumbing fixtures.
7. Other: _____



Additional Work Fee: _____
 Amendment Fee: _____
Total Fee Due: _____
 (amendment fee plus additional work fee)

Date: _____

TOWN OF SOUTHAMPTON

116 Hampton Road - Southampton, NY 11968 | Ph: 631-702-5700
 www.southamptontownny.gov

APPLICATION TO AMEND BUILDING PERMIT

SCTM NUMBER: _____ - _____ - _____ - _____ BUILDING PERMIT# _____
 NAME OF PROPERTY OWNER: _____
 OWNER EMAIL: _____
 PROPERTY ADDRESS: _____
 NAME OF APPLICANT: _____
 MAILING ADDRESS: _____ PHONE # (____) _____
 NAME OF CONTRACTOR: _____ PHONE # (____) _____
 CONTRACTOR EMAIL: _____

FOR DEPARTMENT USE ONLY

Amended Description of Proposed Work:

NEW, Total Area of Proposed Construction:

Main		Accessory Building		Mezzanine	
1st floor	sq. ft.	1st floor	sq. ft.		sq. ft.
2nd floor	_____ sq. ft.	2nd floor	_____ sq. ft.	Finished Basement	\$ _____ / _____ sq. ft.
Porch		Garage		Deck	
1st floor	sq. ft.	1st floor	sq. ft.	1st floor	sq. ft.
2nd floor	_____ sq. ft.	2nd floor	_____ sq. ft.	2nd floor	_____ sq. ft.
Plumbing		Demolition	sq. ft.	Accessory Structure	sq. ft.
Fixtures Count		Fence	lin. ft.	Swim Pool	
Alteration/ Renovation/Repair	sq. ft.	Spa/Hot Tub	Count: _____	Tennis/Sport Court:	
Pool/Spa Heater	Count: _____				
Other:					

APPLICATION IS HEREBY MADE to the Building Division as per Chapter 123 of the Code of the Town of Southampton.

APPLICATION SUBMITTED BY: _____ Authorized Agent Owner

Read and Check Box

False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the New York State Penal Law.

Original Signature of Applicant _____

Date _____

DEPARTMENT USE ONLY: Amendment Permit to Read:
