



Village of Lake Grove Fire Marshals Office
 Post Office Box 708 Lake Grove, NY 11755
 Voice: 516-807-6412 Fax: 866-884-5378
 Email: FireMarshal@LakeGroveNY.Gov



PERMIT APPLICATION

ALL INFORMATION MUST BE LEGIBLY PRINTED OR TYPED.

All Sections and fields on this application must be completed. Incomplete or illegible applications will be rejected.
 There will be no exceptions.

Section 1: Application Type

- Initial Submittal Re-submittal

Section 2: Nature of work (One permit type per application)

- | | |
|--|--|
| <input type="radio"/> Fire Alarm/Carbon Monoxide Installation/Modification | <input type="radio"/> Propane Gas Installation-Residential |
| <input type="radio"/> Sprinkler System Installation/Modification | <input type="radio"/> Propane Gas Installation-Commercial |
| <input type="radio"/> Fire Suppression Installation/Modification | <input type="radio"/> Fire-stopping |
| <input type="radio"/> Hood & Duct System Installation/Modification | <input type="radio"/> Fireworks |
| <input type="radio"/> Construction/Alteration of a Commercial Building | <input type="radio"/> Special Event/Tent/Other |

Section 3: Project Type (choose one)

- New Construction
 Renovation
 New System
 System Modification

Section 4: Occupancy Type

- Residential
 Commercial
 Non-Structural

Section 5: Project Information

| | | |
|------------------------|--------------------------|--|
| Project Name | | |
| Project Address | | |
| Property Owner | | |
| Applicant (Company) | | |
| Applicant Full Address | | |
| Applicant Phone | Applicant email address: | |

Section 6: Signature

I hereby certify with my signature that I have read and examined this application and know that the information contained in same to be true and correct. I am aware that providing false and/or inaccurate information is a violation of Section §210-45 of the New York State Penal Law. I am aware that all provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. I am further aware that the information contained herein is required under Section §89-14A of the Code of the Village of Lake Grove and failing to do so can result in legal action against the property owner and/or the business owner.

| | |
|---------------------|--|
| Applicant Rep Name | |
| Applicant Signature | |
| Date of Application | |

NOTES:

1-If approved, the permit will be issued on the condition that all provisions of the Code of the Incorporated Village of Lake Grove & any/all additional codes, laws and requirements directly related to the type of permit are fully complied with. Any violation of said codes, laws, requirements or specifications shall result in the immediate suspension or revocation of the permit. No responsibility rests upon the Incorporated Village of Lake Grove, the Fire Marshal, any Fire Department or any Fire District by reason of this permit.

2-This application is not a permit. Submission of same does not grant you a permit or give you the right to commence with any work. Working without a permit will result in legal action against all involved parties and may result in the suspension or revocation of any building permits issued to the site stated on this application.

Office Use

| | | | | | | | |
|------|-----|-------------|---------|---------|-----|-----------|-------|
| Fee: | CK# | Electronics | NYS W/C | Status: | FM: | Rev Date: | Doc#: |
|------|-----|-------------|---------|---------|-----|-----------|-------|