Fee Paid	Permit No:
	Section Block Lot

APPLICATION FOR A COASTAL EROSION MANAGEMENT PERMIT TOWN OF KENDALL

Name	Phone:	
Address:	Work:	
-	Cell:	
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Property Owner's Name:(if different than above)		
Name of contractor:	Phone:	
Address:	Cell:	
Location of Property:		
Street Name, No., Side(N, S,E,W)	Distance & direction from the nearest road intersection	
Coastal Erosion Hazard Area Map Designation (Designations may be a Natural Protective Feature Are, NPF or a Structured Hazard Area, SHA)	, Sheet No of	
Lot Dimensions: FrontFeet: RearFeet: Nature of the activity intended: New Construction, Addition,		
Reconstruction, Relocation, Demolition, Other_		
Brief Description of the Proposed Activity:		
Type of materials to be used:		
Existing Structure (if no existing structure-skip this section)		
Dimensions of Existing Structure: Length Feet; Width	Feet; Height Feet	
(If the structure is an existing Erosion Protection Structure, please give the Height of the st		
New Structures		
Dimensions of entire Structure: LengthFeet; WidthFe	et; HeightFeet form mean low water).	

tructure. % (Percentage may be calculated as the	ground area coverage to be adde	d including any previous additions constructed
ander a Coastal Erosion Management Permit, decided by the ground area		
What is the nearest distance of this structure to the lan		
(Natural Protective Features are Near shore Areas, beaches, Blu	uffs, Dunes, etc. They protect oth	ner lands against erosion, storm induced high water,
wave sections, wind, etc.)	10 XX	
Is the proposed activity designed to be permanen	t? Yes No_	and any light
Estimated Cost:		
(Note: if labor is to be provided without cost, please show as if		
Names and addresses of Adjoining Landowners:	×	
Name and address of Architect or Engineer:		
Additional Documentation Attached to this App	lication (check if attac	ched)
Map drawn to scale, showing entire parce	el and locations of pro	posed activity.
Proof of notification of adjoining landow	ners.	
Proof of compliance with New York Star	te Environmental Qua	lity Review Act. (if necessary)
Copy of DEC Review. (if necessary) Per	mit #	
Copy of Army Corps of Engineers Appro	oval (if necessary Perr	nit #
The undersigned represents that such structure of the Ordinances and Local Law of the Town of K the New York Department of Environmental co- plans submitted herewith are the plans relating to the property is owned by the undersigned except	or activity will be constended, the applicable inservation and the Arto the structure(s) described.	structed and used in accordance with rules and regulations as set forth b my Corps of Engineers, and that the
Dated this,,	Approved	, Not Approved
	Name:	
	Title:	

Note: Any work performed prior to the submitted and approval of the above information is at the risk of the applicant.