Bureau of Buildings City of New Rochelle Department of Development 515 North Avenue New Rochelle, N.Y. 10801 Phone (914) 654-2035 Fax (914) 654-2031



## **CONTRACTOR INFORMATION FORM**

1. Permi	t Application #:			
2. Addre	SS:	Block:	Lot:	
з. Contra	actor:	Address:	Phone:	
4. Const	ruction Superintendent:		Fax:	
State	DAVIT OF CONTRACTOR of New York ) ss. ity of Westchester )			
			depose and say: That he is the contractor, duly	
and that: (C	Circle and complete applicable section	ons)	the resides at	
B) He is th		of the New York Corporation	on	
	(Title or Office)		(Name Of Corporation)	
The under Prevention applicable assumes with the w	resigned further states: That the wan and Building Code, the New Rocce codes and regulations whether responsibility for all acts and wor ork performed.	rkman's Compensation approversely will be performed in accordance by the Building Code, the New For not shown on the plans and so k performed by Sub-Contractors	time employed by him at the subject location in val)  ance with the New York State Uniform Fire Rochelle Zoning Ordinance and all other pecifications in the subject application, and he s, Laborers, and Material men in connection	
Sworn to t	pefore me this		Signature of Contractor	
Dovef		20	9	
Day of		, 20	Notary Public or Commissioner	
Insura genera Insura	nce naming the Bureau of Buildi			
<u></u>				
I,	tor named on the front of this docum	, as the owner of nent to perform the work under the	the subject premises and I have authorized the subject application.	
Sworn to	before me this			
			Signature of Owner	
Day of		, 20	Noton, Public or Commissioner	
			Notary Public or Commissioner	