

**TOWN OF EVANS – VILLAGE OF ANGOLA
BUILDING PERMIT APPLICATION**

Date of Application: _____

Owner Name: _____

Owner Mailing Address: _____

Owner Telephone Number: _____

Construction Location (if different) _____

Contractor: _____

Contractor Address: _____

Contact Person and Telephone Number _____

Building Type

Residential Commercial

Description of Work

Project: _____

Square footage: _____

Estimated cost of project: _____

For Electrical:

Size of Service _____

ESO or ESR Number _____

Please send completed application to:

Town of Evans Code Enforcement Office

8787 Erie Road

Angola, New York 14006

OR: email to pryrase@townofevans.org

Our contact telephone number is (716) 549-5753

Our fax number is (716) 549-0456