

## **CITY OF LOCKPORT**MISCELLANEOUS APPLICATION

Applicant Name:	Phone #:	Email:		
Project Address:				
Property Owner Name:	Phone#:	Email:		
Project Description:				
Contractor(s):				
Does your subdivision have covenants/restrictions?		Yes	No	
If so, have you received approval from your Homeowner's Association?		Yes	No	
Estimated Construction Value: \$		Historic District:	_ Yes	No
and regulations set forth by	ead, understand and agree to the City Council of Lockport.			
_	For Office Use Only			
Permit #:		Permit Fee:		
Building Dept. Approval:		Date:		
Planning Dept. Approval:	Date:			
Comments:				