

Has an application been made to or granted by any other entity, and by which agency? Provide copies

N/A

Are there any patios, structures, pools or fences that exist on your property that are not shown on the survey that you are submitting?

Yes NO

If yes, please provide a plot plan showing all improvements.

Do you have any construction taking place at this time concerning your premises?

Yes NO

Please submit a copy of your building permit and survey as approved by the Building Department

Describe the construction: _____

Do you or any co-owner also own other land adjoining or close to this parcel?

Yes NO If yes, please label the proximity of your lands on your survey.

Please list present use or operations conducted at this parcel SINGLE FAMILY HOME and the proposed use _____

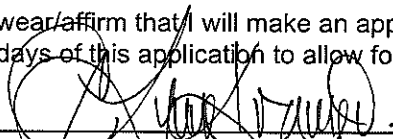
DETACHED GARAGE (i.e.: existing single family, proposed: same with garage, pool or other)

NOTARIZED STATEMENT

By submitting this application, I hereby swear/affirm that this variance is the MINIMUM that is necessary and adequate, and at the same time preserve and protect the character of the neighborhood and the health, safety and welfare of the community.

I further swear/affirm that the information in this application is a truthful and honest representation of the property for which this request is made.

I further swear/affirm that I will make an appointment with the Zoning Administrator within five business days of this application to allow for an inspection of said property.



Signature of Applicant or Authorized Agent
Agent must submit Owner Authorization Form

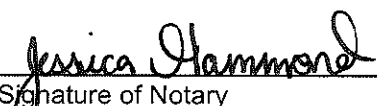
C. LYNNE KRAMER

Printed Name

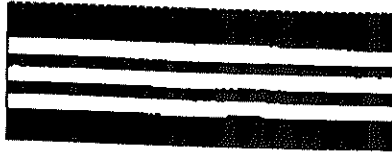
Sworn to before me this 20th day of January, 2026.

Place Notary Stamp here:

JESSICA HAMMOND
Notary Public, State of New York
Registration No. 01HAC024654
Qualified in Dutchess County
Commission Expires 12-17-2029



Signature of Notary



Dutchess County Clerk Recording Page

Record & Return To:

SHAWN BORRELLI PRATT ESQ
3304 FRANKLIN AVE
PO BOX 1238
MILLBROOK, NY 12545

Date Recorded: 8/12/2022
Time Recorded: 11:20 AM

Document #: 02 2022 3349

Received From: NORTH RIVER ABSTRACT

Grantor: BOVA DAVID H
Grantee: CAROL LYNNE KRAMER TRUST

Recorded In: Deed
Instrument Type:

Tax District: Washington

Examined and Charged As Follows :

Recording Charge: \$210.00
Transfer Tax Amount: \$18,900.00
Includes Mansion Tax: \$13,500.00
Transfer Tax Number: 229

Number of Pages: 6

*** Do Not Detach This Page
*** This is Not A Bill

Red Hook Transfer Tax:

RP5217: Y
TP-584: Y

County Clerk By: oth
Receipt #: 26030
Batch Record: 171

Bradford Kendall
County Clerk



0220223349



TOWN OF WASHINGTON
BUILDING AND ZONING DEPARTMENT
P.O. Box 667, 10 Reservoir Drive
Millbrook, NY 12545
Phone (845) 677-3419 Fax (845) 677-1195
www.washingtonny.org

CERTIFICATE OF OCCUPANCY


Certificate No: 02959

Location of Property: 6767-00-023111, 816 Stanford Road

Description of the Completed Project:

- New construction single family home
- Type VB Construction
- Assembly occupant load: N/A
- Automatic Sprinkler System Provided: No Required: No
- Two story, 1 kitchen, 3 bedroom, 3 full and 1 half bathroom, 1 gas fireplace, basement full and partially finished. 280 square foot finished basement recreation room, 1,707 square feet first floor, 1,141 square feet second floor, 3,128 square feet total habitable space. 2 bay finished garage, mechanical room and storage in remainder of basement. Foundation: poured concrete footings, CMU walls, steel girder, concrete slab. Modular house: wood framed floors, wood framed walls, wood truss roof. Exterior finish: parged foundation walls, vinyl siding, asphalt shingle. Interior finish: Finished basement: carpet, gypsum board walls and ceiling. Garage: concrete slab floor, gypsum board walls and ceiling. Modular: Floors wood and tile, walls and ceiling gypsum board. West side covered deck: 38' x 9' 342 square feet. Concrete pier foundation, pressure treated wood framing, pressure treated wood posts, LVL and steel header, wood framed roof. Composite decking, wood beadboard ceiling, asphalt shingle roof. East side covered entry: 4' x 7' 28 square foot wood framed roof, pressure treated wood framed platform and stairs, composite decking, asphalt shingles. South side: 20' x 22' 440 square foot bluestone patio. 1000 gallon underground LPG tank. Hydronic radiant heat in basement slab and under first floor kitchen and bathroom, forced air heat and A/C throughout. Viessman Vitocell 300-V indirect water heater for radiant heat. Vitodens 100-W Model B1HE-150 LPG fired condensing boiler for heat and domestic hot water. (2) First Co. Model 18 HBXB-HW air handlers, (3) Heil Model N4A318GKF101 A/C only condensers. Kohler standby generator and transfer switch. Basement: R-10 XPS sub slab, R-24 closed cell spray foam walls, R-21 open cell spray foam above garage

ceiling only. Modular: UA trade off method, not prescriptive path. R-21 cavity insulation in walls with 1" unspecified continuous exterior foam. Cathedral ceilings R-30, remaining ceilings R-38. Doors and windows vary, default value U-0.30. Air tightness measured at 2.97 ACH/50 on 5/13/2022.

Signature  Date Signed 7/18/2022
BUILDING INSPECTOR, TOWN OF WASHINGTON

POST THIS CERTIFICATE OF OCCUPANCY ON THE PROPERTY FOR ONE MONTH AFTER RECEIPT SO THAT IT MAY BE READ BY THE PUBLIC

617.20
Appendix B
Short Environmental Assessment Form

actions for Completing

- Project Information. The applicant or project sponsor is responsible for the completion of Part I. Responses are part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part I based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part I. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

| | | | |
|--|--|-------------------------------------|--------------------------|
| Part I - Project and Sponsor Information | | | |
| Name of Applicant or Sponsor: <u>CAROL LYNN KRAMER</u> | | | |
| Telephone: <u>845-677-4120</u> | | | |
| E-Mail: <u>LYKR@icloud.com</u> | | | |
| Address: <u>816 STANFORD ROAD</u> | | | |
| City/PO: <u>CLINTON CORNERS</u> | | State: <u>NY</u> | Zip Code: <u>12514</u> |
| 1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2. | | NO | YES |
| | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval: | | NO | YES |
| | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3.a. Total acreage of the site of the proposed action? _____ acres | | | |
| b. Total acreage to be physically disturbed? _____ acres | | | |
| c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ acres | | | |
| 4. Check all land uses that occur on, adjoining and near the proposed action. | | | |
| <input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban) | | | |
| <input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____ | | | |
| <input type="checkbox"/> Parkland | | | |

| | | | |
|--|-------------------------------------|-------------------------------------|--------------------------|
| 5. Is the proposed action, a. A permitted use under the zoning regulations? | NO | YES | N/A |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Consistent with the adopted comprehensive plan? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Is the proposed action consistent with the predominant character of the existing built or natural landscape? | NO | YES | |
| | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____ | NO | YES | |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 8. a. Will the proposed action result in a substantial increase in traffic above present levels? | NO | YES | |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| b. Are public transportation service(s) available at or near the site of the proposed action? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____ | NO | YES | |
| | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: <u>N/A</u> | NO | YES | |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____ | NO | YES | |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places? b. Is the proposed action located in an archeological sensitive area? | NO | YES | |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency? b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____ | NO | YES | |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input type="checkbox"/> Suburban | | | |
| 15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered? | NO | YES | |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 16. Is the project site located in the 100 year flood plain? | NO | YES | |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES | NO | YES | |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |

| | | |
|---|-------------------------------------|--------------------------|
| 18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____ | NO | YES |
| _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____ | NO | YES |
| _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____ | NO | YES |
| _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE | | |
| Applicant/sponsor name: _____ | Date: <u>2.10.26</u> | |
| Signature: _____ | | |

Part 2 - Impact Assessment. The Lead Agency is responsible for the completion of Part 2. Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

| | No, or small impact may occur | Moderate to large impact may occur |
|--|-------------------------------------|------------------------------------|
| 1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Will the proposed action result in a change in the use or intensity of use of land? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Will the proposed action impair the character or quality of the existing community? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7. Will the proposed action impact existing: a. public / private water supplies? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. public / private wastewater treatment utilities? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

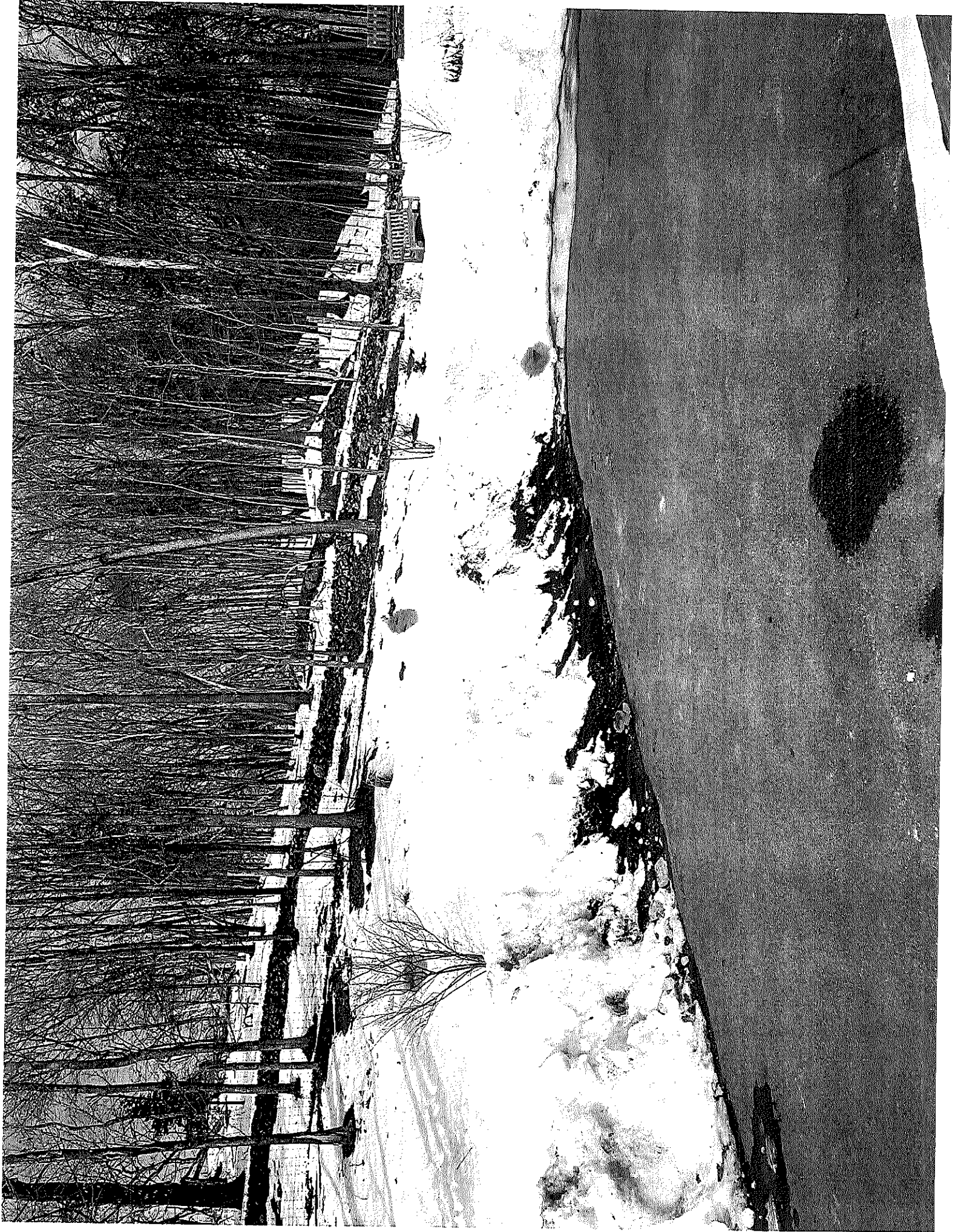
| | No, or small impact may occur | Moderate to large impact may occur |
|--|-------------------------------------|------------------------------------|
| the proposed action result in an increase in the potential for erosion, flooding or drainage problems? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| the proposed action create a hazard to environmental resources or human health? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Determination of significance. The Lead Agency is responsible for the completion of Part 3. For every item in Part 2 that was answered "moderate to large impact may occur", or if there is a need to explain why a particular item of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. You should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, frequency, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

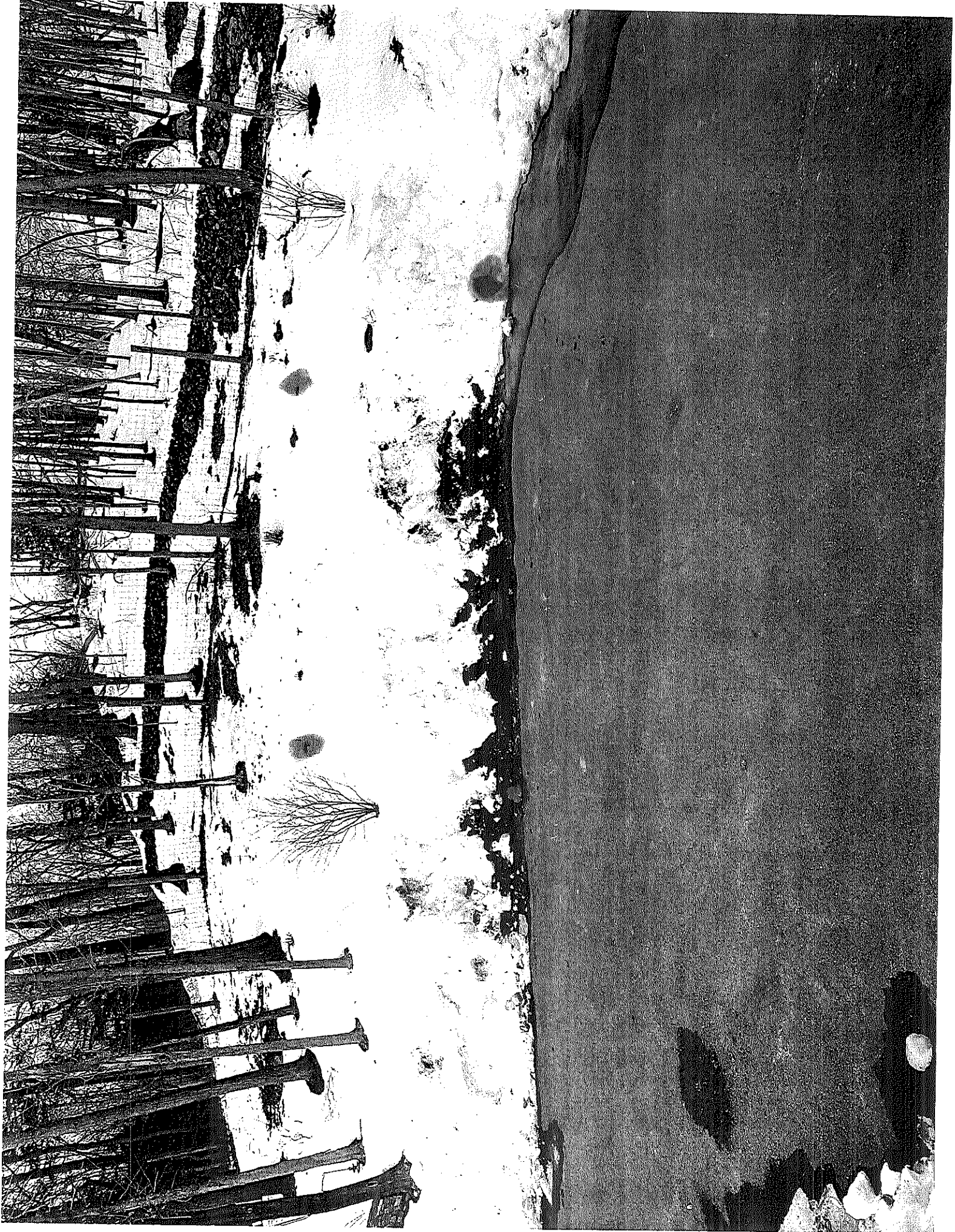
- Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.
- Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.

| | |
|---|--|
| _____ Name of Lead Agency | _____ Date |
| _____ Print or Type Name of Responsible Officer in Lead Agency | _____ Title of Responsible Officer |
| _____ Signature of Responsible Officer in Lead Agency | _____ Signature of Preparer (if different from Responsible Officer) |

PRINT





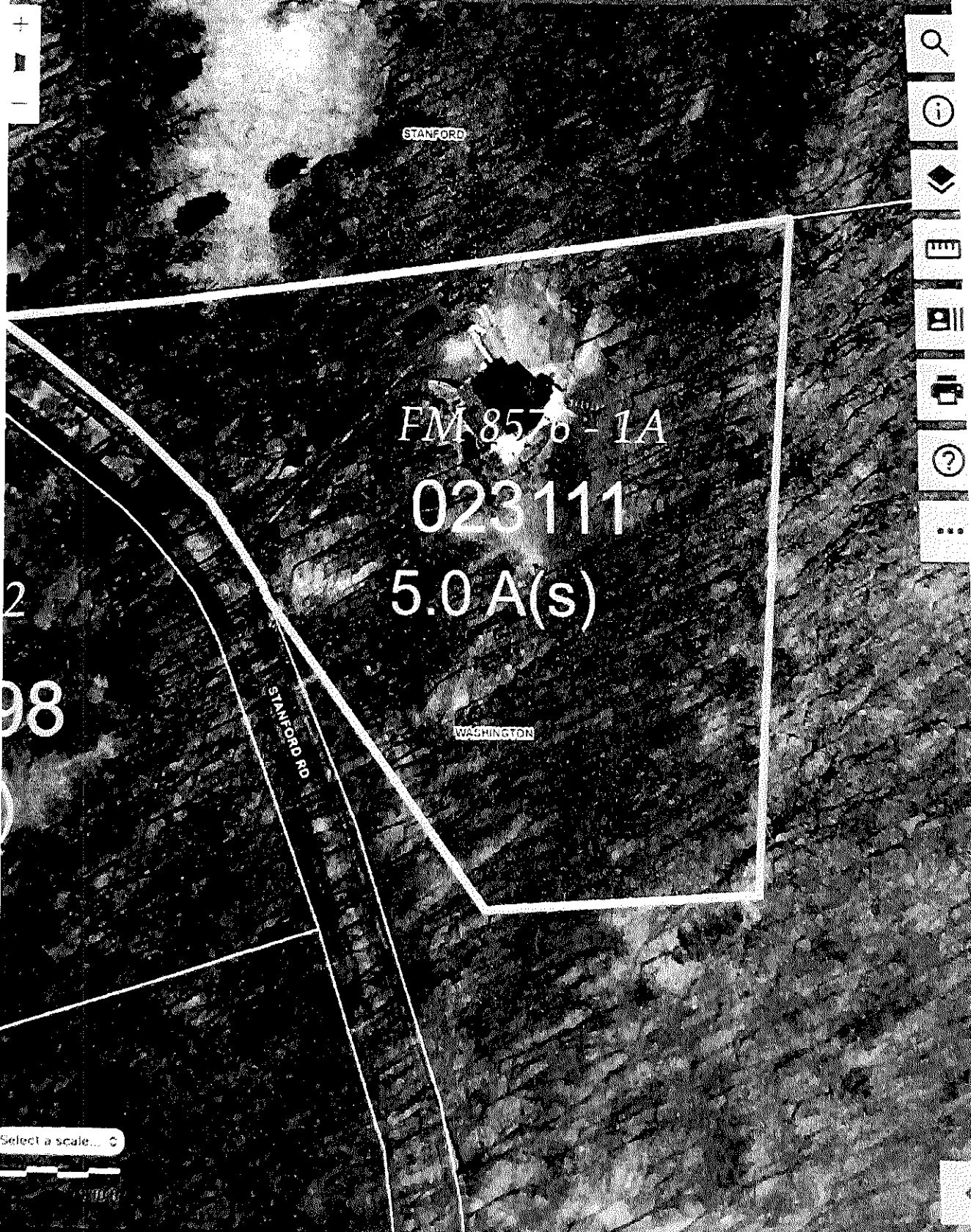








Search bar



- Search icon
- Information icon
- Layers icon
- Scale bar icon
- Print icon
- Help icon
- More options icon

Select a scale...





Town of Washington

Building Department
10 Reservoir Drive • P.O Box 667
Millbrook, NY 12545

(845) 677-3419 EXT 112 • buildinginspector@washingtontny.org

Application for Building Permit

This application must be completely filled out with ink and submitted to the Building Office at the Town of Washington Town Hall. To be submitted along with this application:

1. Two complete plans of the proposed construction, showing materials and equipment to be used, and the details of structural, mechanical, plumbing, electrical, and Energy Code Compliance, as applicable. The Building Inspector may require that these plans be stamped and signed by a New York State registered architect or engineer.
2. A plot plan showing the proposed construction in relation to the property line boundaries, existing structures, and wetlands, if applicable.
3. Owner's Authorization Form and Insurance information as required, see below.

Applicant Name: CAROL LYNN KRAMER
Address: 816 STANFORD ROAD **Phone:** 845-677-4120
Email: LYKR@ICLOUD.COM

Property Owner Name: _____
Address: _____ **Phone:** _____

Signed and Notarized Owner's Authorization Form Attached OR Property Owner same as Applicant

Property Address: 816 STANFORD RD CLINTON CORNERS 12514

Tax Grid ID Number: 135889-6767-00-023111-0000 **Zoning District:** RR10

Is the proposed project located in a wetland or 100 year flood plain? NO

Proposed Work: Setbacks from property line: Front 310', Rear 370', Side 14.44', Side 2 26'

New Building Addition Alteration/Renovation Repair Installation (HVAC, etc) Demolition Retroactive C/O

Swimming Pool/Hot Tub Fireplace/Wood/Pellet Stove Roofing/Siding Deck Tent >400FT² Agricultural

Propane Tank Shed or Barn Solar Other (please specify) _____

Builder's Name: DAVID LEWIS **Phone:** 845-656-2549

Builder's Address: 177 N SMITH RD LAGRANGE

Builder's Email: DAVIDLEWIS755@GMAIL.COM

Builders must provide proof of Workers Compensation Insurance (C105.2 or U26.3) and proof of Disability

Benefits Compensation (DB120.1) Homeowners or Sole Proprietors may provide CE-200 Certificate of Attestation

of Exemption. Builder's Insurance Information attached Exemption Form Attached

Estimated Cost of Project: 45,000 **Description of Proposed Work (include square footage as applicable):**

14' x 24' SINGLE STORY DETACHED GARAGE, & CAR

Please read, initial, and sign page 2.



Town of Washington

Application for Building Permit

I hereby certify that I have read, do understand, and will comply with the following: (Please read, initial each, then sign)

1. The work covered by this application may not be commenced before the issuance of a Building Permit. Work begun prior to the issuance of a Building Permit will be subject to an additional fee of 55%. JK
2. Building Permits shall be visibly displayed at the work site and remain visible until the project has been completed. JK
3. All work shall be performed in accordance with the construction documents submitted and accepted as part of the application. The Building Inspector shall be notified immediately in the event of changes occurring during construction. JK
4. A building permit becomes void if the work is not started within 180 days of issue. Building permits expire 1 year after issue, and may be renewed for up to (2) 6 month periods, renewal fee is 55% of the original fee. JK
5. The applicant agrees to comply with all applicable State and Town laws, ordinances and regulations. JK
6. Work shall remain accessible and exposed until inspected and accepted by the Building Inspector, and it is the responsibility of the applicant to schedule all required inspections. JK
7. No structure or improvement may be occupied or used in whole or in part for any purpose whatsoever until a Certificate of Occupancy or Certificate of Compliance has been issued. JK
8. The applicant does hereby give consent to representatives of the Town of Washington, including, but not limited to the Building Inspector, Zoning Administrator or Assessor to conduct such inspections as they deem necessary in relation to this building permit application, date and time of inspections to be scheduled in advance with the property owner or their representative. JK

Applicant: _____ Date: 12/29/2025

[Signature]
SIGNATURE

Building Inspector: _____ Date: _____

FOR OFFICE USE ONLY: Permit Number: _____ Permit Fee: _____ Check Number: _____

Zoning Approval No Open Permits or Violations Insurance Plans and Site Plan Plan Review

Reason if Denied/Referred: FAILURE TO MEET SIDE YARD SET BACK. REQ 100', ACTUAL 26'

Type of Construction: I II III IV V A B Use and Occupancy Classification: _____

Assembly Occupant Load: _____ Automatic Sprinkler System: Y N Required: Y N

Bedrooms: _____ # Bathrooms: _____ # Kitchens: _____ Basement Type: _____ Finished: Y N Sq Ft: _____

Walls: _____ Siding: _____ Roof: _____ Finished Attic: Y N

Insulation: Ceiling _____ Walls: _____ Floor: _____ Slab: _____ Foundation: _____



**TOWN OF WASHINGTON
BUILDING AND ZONING DEPARTMENT**

P.O. Box 667
10 Reservoir Drive
Millbrook, NY 12545
Phone (845) 677-3419 Fax (845) 677-1195
www.washingtonny.org

CERTIFICATE OF COMPLIANCE

Certificate No.: 03188

Location of Property: 6767-00-023111-0000, 816 Stanford Rd

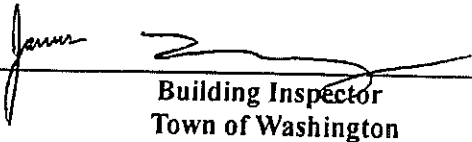
Property Owner: Carol Kramer

Description of Completed Project:

Siding replacement: Partial natural stone veneer. 16 psf, less than 5" thickness, adhered over existing 1" 25 psf polyiso foam. Remainder vertical wood shiplap with no change to flashing.

I have examined the premises described in the "Application for Building or Zoning Permit" No. 03188 and find the work performed is in compliance with the work described in the approved application; therefore, the completed project may be used for the purposes described in the "Application for Building Permit" No. 03188 . No Violations on record.

Signature


Building Inspector
Town of Washington

Date Signed

11/29/2022

Post this Certificate of Compliance on the property for one month after receipt, so that it may be read by the public.



**TOWN OF WASHINGTON
BUILDING DEPARTMENT
10 Reservoir Dr, PO Box 667
Millbrook, NY 12545
845-677-3419**

PLEASE NOTE: If ownership is held by a corporation, LLC, jointly or in partnership, each owner and/or partner must sign a separate owner's endorsement. If the owner or owners are making the application, this endorsement is not required.

OWNER'S ENDORSEMENT

STATE OF NEW YORK
COUNTY OF _____) ss:

CAROL LYNN KRAMER, being duly sworn, deposes and says:

- I am: (check one)
- 1. the sole owner in fee (One individual on the tax roll)
 - 2. a part owner in fee (Two or more individuals on the tax roll)
 - 3. an officer of the corporation which is the owner in fee of the premises described in the foregoing application.
 - 4. designated party authorized to act pursuant to a trust or legal document. (Trustees listed on tax roll)
 - 5. member/owner(s) of Limited Liability Corporation (LLC).

(If you checked #3, #4 or #5, please provide proof of legatee (ie: Corporate Resolution, Surrogate Letter, Executor of the Will, Certified Letter of Testamentary, Letter of Administration, Attorney-Opinion Letter, Letter or Probate, Power of Attorney, etc.)

I reside at 816 STANFORD ROAD
 City CLINTON CORNERS State NY Zip 12514
 I have authorized (name) DAVID LEWIS

(Company) _____
 to make the foregoing application to the Town of Washington for approval as described herein for the property located at 816 STANFORD ROAD
 property ID # 6767-00-023111-0000

Signature *Carol Kramer*

23rd day of JANUARY, 2026
 Notary Public *David M. Fountain* Notary Stamp:

If owner is a corporation, please indicate name of corporation and title of the corporate officer whose signature appears above. Sworn to before me this

David M. Fountain
 Notary Public, State of New York
 Commission Number: 01FO6016940
 Qualified in Dutchess County
 Commission Expires November 30 2026



Town of Washington

TOWN OF WASHINGTON
BUILDING, PLANNING & ZONING
10 Reservoir Dr, PO Box 667
Millbrook, NY 12545
845-677-3419

Consent to Inspection

The undersigned, does hereby state:

CAROL LYNN'S KRAMER and _____
Owner Name Owner Name

That the undersigned is/are the owner(s) of the premises in Town of Washington, located at
816 STANFORD RD CLINTON CORNER

which is shown and designated on the Dutchess County Tax Map as:

6767-00-023111-

That the undersigned (has) (have) filed, or cause to be filed, an application with the Town of Washington for the following:

- Assessment Review
- Building Permit
- Municipal Search
- Planning Board Application
- Zoning Board of Appeals Application

That the undersigned do(es) hereby give consent to representatives of the Town of Washington, including but not limited to the Building Inspector, Zoning Administrator, or Assessor of the Town of Washington to enter upon the above described property, including any and all buildings located thereon, to conduct such inspections as they may deem necessary with respect to the aforesaid application, including inspections to determine that said premises comply with all of the laws, ordinances, rules, and regulations of the Town of Washington. The time and date of the inspection will be scheduled in advance with the property owner or their representative. **Failure to schedule an inspection will delay your project.**

That the undersigned, in consenting to such inspections, does so with the knowledge and understanding that any information obtained will be used in conjunction with the application, and may delay your application if violations of the laws, ordinances, rules or regulations of the Town of Washington have been identified, and that your assessment may be increased based upon information found in the site inspection.

Contact person for inspection: LYNN'S KRAMER
Phone Number to schedule inspection: 845-677-4120

[Signature] _____
Signature Signature
C. LYNN'S KRAMER _____
Print Name Print Name

Dated: 1.20.2020 Dated: _____