

Town of Colonie PUBLIC OPERATIONS CENTER 347 Old Niskayuna Road Latham, New York 12110-2286

Building Department 518-783-2706

Date _	November	5	_19_9/			Реп	nit No. 97-1	1196
			NEW YORK STA THE TOWN OF					.D-
			t Be Kept on the P cations until Full C					
N	YEAR	FROM DA	PERMIT IF FOR TE ISSUED. THI TWO (2) YEARS	S BUILDIN	IG PERMIT	IF FOR C	, ,	
Perr	nission is here	by granted t	o Applicant:					
NAME	OF APPLICA	NT: Ros	ewood Homebu	ilders				
ADDRE	SS OF APPLI	CANT:	27 New Karne	r Rd				
		Numl	Chany			ΝΥ	12205	
F			.ly - 3 bedro	oms, 1½	baths, 2	er ga	Zip Code rage	
ADDRE	SS OF SITE (F PROPOS	ED ACTION:6	Vanessa	Court			
pursuant Departm	- -	n dated, and	l plans and specif	-	proved by t	he Director	of Building	
NAME C	F PROPERT	Y OWNER:	same as ab	ove				
ADDRES	S OF PROPE	RTY OWN	ER: Number Street					
			City		,	State	Zip Code	
Estimated Floor Are	7 CO21 \$ 2	,000.	Sq. Ft.	Fee \$ _	320.	14 (31/2 m	understanden.
				D	irector of I	Building D	epartment	

BUILDING DEPT. COPY



Town of Colonie PUBLIC OPERATIONS CENTER 347 Old Niskayuna Road Latham, New York 12110-2286

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Date	Janu	ary 29,	1998			Permi	No. 98-00
PER ING	MIT MUS	ST COMPLY ND THE CO	Y WITH NEW YOR ODE OF THE TOW	K STATE U N OF COL	INIFORM FIRE I ONIE, CHAPTEI	PREVENTION R 190 (ZONIN	I AND BUILD- IG LAW).
•		(This Perr Plans and	nit Must Be Kept or Specifications until	the Premise Full Compl	es With One Set of etion of the Work	of Approved Authorized)	
	NOTE:	YEAR FR	LDING PERMIT II OM DATE ISSUEI KPIRES TWO (2) Y	O. THIS BU	ILDING PERMIT	r if for coi	ONE (1) MMERCIAL
F	ermission	is hereby g	ranted to Applicant	:	- 1 - 1 - 1 - 1 ≥	· · · · · ·	•
NAM	1E OF AP	PLICANT:	Rosewood	d Home Bui	lders		
ADD	RESS OF	APPLICA	NT: 427 New Number Street	Karner Rd			
			Albany,	NY 12205		<u> </u>	Zip Code
			City 2' x 22' bedroom	and Gull			ZIP Code
	Propose	ed use:	. X ZZ Deditoon	and rurr	Dacita		
					•		
ADD	RESS OF	SITE OF F	ROPOSED ACTIC)N: <u>6 Van</u>	essa Ct.		
						41 - TS!	. f D:14:
pursu	ant to ap	plication da	ated, and plans and	specification	ons approved by	the Director	of Building .
Depa	rtment.						
NAM	E OF PR	OPERTY O	WNER:	(+			
ADD	RESS OF	PROPERT	Y OWNER: Number	Street			
							Zip Code
			City			Siate	Zip Code
m				E	ee\$ 46		
		t\$ <u>5,000</u>			27		
		•			MANA MARIE	1. 1. 1.	32 N .
					Director of	Building De	partment



Town of Colonie PUBLIC OPERATIONS CENTER 347 Old Niskayuna Road Latham, New York 12110-2286

Building Department 518-783-2706

Date	Marc	h 26.	19	98	Permit No. 98-0232
PER ING	MIT MUS	T COMI	PLY WITH NE	W YORK STAT IE TOWN OF C	E UNIFORM FIRE PREVENTION AND BUILD- OLONIE, CHAPTER 190 (ZONING LAW).
		(This P	ermit Must Be	Kept on the Presons until Full Cor	mises With One Set of Approved mpletion of the Work Authorized)
	NOTE:	YEAR	FROM DATE	ISSUED. THIS	ESIDENTIAL WORK EXPIRES ONE (1) BUILDING PERMIT IF FOR COMMERCIAL FROM DATE ISSUED.
]	Permissior	is heret	y granted to A	pplicant:	
NAN	ME OF AP	PLICAN	r:	Www.	
ADI	ORESS OF	APPLI		6 Vanessa Ct. Succi	
		ŕ	City	Albany NY 1220	State Zip Code
	Propos	ed use: _	remodel ex	isting garage	into paytroom.
		•	STARTED WI	THOUT A PERMIT	Г
		i cimi c	E DD ODOGET	ACTION:6	Vanessa Ct.
ADI	DRESS OF	SHEC	r Proposel	ACTION.	
	uant to ap		dated, and p	lans and specific	cations approved by the Director of Building
NAN	ие of Pr	OPERT	OWNER:	same	
ADE	ORESS OF	PROPE	RTY OWNER	Number Street	
				City	State Zip Code
	mated Cos or Area	-		Sq. Ft.	Fee\$ 30.
	1		•	• • •	Director of Building Department

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Town of Colonie PUBLIC OPERATIONS CENTER 347 Old Niskayuna Road Latham, New York 12110-2286

Building Department 518-783-2706

Date <u>Dec</u>	ember 23	1998		×.	Permi	t No. 98-1582
PERMIT MUS	ST COMPLY V ND THE COD	VITH NEW YORK S E OF THE TOWN (TATE UNII OF COLONI	FORM FIRE P E, CHAPTER	REVENTION 190 (ZONI)	N AND BUILD- NG LAW).
•	(This Permit Plans and Sp	Must Be Kept on the ecifications until-Ful	Premises W	lith One Set of n of the Work	f Approved Authorized)	:
NOTE:	YEAR FROM	ING PERMIT IF FO M DATE ISSUED. T RES TWO (2) YEA	HIS BUILD	ING PERMIT	'IF FOR CO	ONE (1) MMERCIAL
Permissio	n is hereby grar	ited to Applicant:	· .			
nāme of ai	PPLICANT:					
		: 6 Vanessa Co Number Street Albany City eground pool 1	:		NY State	1 2 2 0 5 Zip Code
•	•	OUT PERMIT				

pursuant to ap		OPOSED ACTION:			the Director	of Building
Department.						
NAME OF PR	OPERTY OW	NER: <u>same</u>				
ADDRESS OF	F PROPERTY	OWNER: Number Street	æl		<u>, , </u>	
		City		•	State	Zip Code
Estimated Co Floor Area	st \$ 250.	Sq. Ft.	Fee \$	choef	M. 74	1 0-2-h
			,	Director of	Building De	epartment

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