



Town of Ramapo

237 Route 59

Suffern, NY 10901

845-357-5100 x 280 PHONE

845-357-5140 FAX

CONTACT SHEET

Owner

Name: _____

Address: _____

Phone: _____

Applicant (if different from owner)

Name: _____

Address: _____

Phone: _____

General Contractor

License Number: _____

Name: _____

Address: _____

Phone: _____

Subcontractor (if homeowner is acting as GC)

License Number: _____

Name: _____

Address: _____

Phone: _____

Plumber (if applicable)

License Number: _____

Name: _____

Address: _____

Phone: _____

Electrician (if applicable)

License Number: _____

Name: _____

Address: _____

Phone: _____