# TOWN OF CROWN POINT

## BUILDING/USE PERMIT

PO BOX 443, 17 MONITOR BAY RD, CROWN POINT, NY 12928

FOR OFFICE USE ONLY
APPLICATION NO. _____
DATE RECEIVED _____
DATE EXAMINED _____
AMOUNT OF FEE RECEIVED _____

☐ APPROVED PERMIT NO. _____

☐ DISAPPROVED REASON: _____

EXAMINED BY: _____

JOB LOCATION: _____
STREET / ADDRESS
TAX MAP SECTION _____ BLOCK _____ LOT _____

APPLICANT:

NAME: _____

MAILING ADDRESS: _____

TELEPHONE: _____

APPLICANT:
☐ OWNER
☐ LESSEE
☐ AGENT
☐ ARCHITECT / ENGINEER
☐ BUILDER / CONTRACTOR

NAME & ADDRESS OF OWNER IF DIFFERENT THAN APPLICANT: _____

IF OWNER / APPLICANT IS A CORPORATION GIVE NAME AND TITLE OF TWO OFFICERS
1. _____
2. _____

OCCUPANCY: (CHECK APPROPRIATE BOX)

| | | | DESCRIBE | |
|---|---|---|---|---|
| ☐ ONE-FAMILY DWELLING | R3 | ☐ BUSINESS | _____ | GROUP B |
| ☐ TWO-FAMILY DWELLING | R3 | ☐ MERCANTILE | _____ | GROUP M |
| MULTIPLE DWELLING | | ☐ INDUSTRIAL | _____ | GROUP F |
| ☐ PERMANENT OCCUPANCY | R2 | ☐ STORAGE | _____ | GROUP S |
| ☐ TRANSIENT OCCUPANCY | R1 | ☐ ASSEMBLY | _____ | GROUP A |
| | | ☐ INSTITUTIONAL | _____ | GROUP I |
| ☐ ADULT RESIDENTIAL CARE (NOT MORE THAN 16 OCCUPANTS) | R4 | ☐ MISC. | _____ | GROUP U |

NATURE OF PROPOSED WORK: (CHECK ANY THAT APPLY)
☐ CONSTRUCTION OF A NEW STRUCTURE
☐ ADDITION TO EXISTING STRUCTURE
☐ ALTERATION TO EXISTING STRUCTURE
☐ OTHER (DESCRIBE) ☐ CHANGE OF OCCUPANCY
_____

ESTIMATED COST (EXCLUSIVE OF LAND)
$_____
$_____
$_____
$_____
$_____ TOTAL

ENGINEER, ARCHITECT, AND/OR (SUB) CONTRACTORS:

NAME: _____ PHASE OF WORK: _____ PHONE NO.: _____
NAME: _____ PHASE OF WORK: _____ PHONE NO.: _____
NAME: _____ PHASE OF WORK: _____ PHONE NO.: _____
NAME: _____ PHASE OF WORK: _____ PHONE NO.: _____

☐ IF OWNER BUILT CHECK HERE

PLOT DIAGRAM: LOCATE ALL BUILDINGS, APPLICABLE SEPTIC SYSTEMS, AND WATER SUPPLIES (EXISTING AND PROPOSED). SHOW STREET(S) / ROAD(S) AND THEIR NAME(S) AND SHOW SET BACK DISTANCES FROM STREET(S) / ROAD(S) AND ADJACENT PROPERTY LINES.

APPLICATION is hereby made to the Town of Crown Point Department of Code Enforcement for the insurance of a building or change of use permit pursuant to the provisions of the Building and Fire Codes of New York State. The applicant agrees to comply with all applicable provisions of said law and codes as well as any local, county, state or federal laws and/or ordinances: and swears that all statement contained in this application are true to the best of his/her knowledge and beliefs.

Applicant's signature _____ Date _____

## IMPORTANT - PLEASE TAKE NOTICE

> **ALL APPLICATIONS MUST BE ACCOMPANIED BY TWO (2) SETS OF PLANS OF THE PROPOSED PROJECT AND SPECIFICATIONS OF THE MATERIALS TO BE USED.**

> **PLANS SUBMITTED MUST BE SIGNED AND SEALED BY AN ARCHITECT OR ENGINEER LICENSED BY THE STATE OF NEW YORK. EXCEPTIONS TO THIS REQUIREMENT ARE:**

* **New residential constructions - 1,500 gross sq. ft. or less.**

* **alterations costing $15,000 or less, which do not involve structural changes or affect public safety.**