BUILDING PERMIT APPLICATION
TOWN OF ROSE

5074 N. Main Street, P.O. Box 310
N. Rose, New York 14516 • **315-587-4418**

Permit # _____

❑ NEW
❑ RENEW
❑ AMEND

(1) Name _____

Property Location _____

Tax # _____ - _____ - _____ Zoned: ❑ R.R. ❑ AG. ❑ G.B. ❑ H.G.B ❑ H.R. ❑ IND. ❑ L.C.

Owner's Address _____

Town _____ State _____ Zip _____ Phone _____

(2) Present Use:
- ❑ Residence
- ❑ Seasonal
- ❑ Agricultural
- ❑ Commercial
- ❑ Vacant
- ❑ Other

(3) Buildings:
- ❑ House
- ❑ Mobile ____ yr.
- ❑ Cottage
- ❑ Garage
- ❑ Barn
- ❑ Shed
- ❑ Other _____

(4) Interest:
- ❑ Owner
- ❑ Partner
- ❑ Tenant
- ❑ Pending Purchase Con.
- ❑ Contractor
- ❑ Other _____

(5) Type Proposed Improvement:
- ❑ New Construction
- ❑ Addition
- ❑ Alteration
- ❑ Replacement
- ❑ Demolition
- ❑ Change of Use
- ❑ Other _____

(6)
- ❑ Residence
- ❑ Seasonal Residence
- ❑ Mobile ____yr.
- ❑ Modular
- ❑ Multi-Family ____# Units
- ❑ Garage
- ❑ Barn
- ❑ Shed
- ❑ Deck
- ❑ Patio
- ❑ Pool
- ❑ Sign
- ❑ Heat
- ❑ Roof
- ❑ Cabin/Camp
- ❑ Septic
- ❑ Excavation
- ❑ Foundation
- ❑ Dock
- ❑ Boat House
- ❑ Break Wall
- ❑ Other _____

(7) Proposed Improvement:

Foundation: ❑ Post ❑ Concrete ❑ Masonry ❑ Other _____
Frame: ❑ Masonry ❑ Concrete ❑ Brick ❑ Wood ❑ Steel ❑ Other _____
Sewer: ❑ Conventional ❑ Alternate ❑ Public ❑ Other _____
Distance from Well ____ Water ____ House ____ Other _____
Water: ❑ Drilled Well ❑ Dug Well ❑ Cistern ❑ Public ❑ Other _____
Plumbing: ❑ PVC ❑ Copper ❑ Other _____
Heat: ❑ Air ❑ Water ❑ Central ❑ None ❑ Other _____
Fuel: ❑ Oil ❑ Gas ❑ Elect. ❑ Solid ❑ Solar ❑ Other _____
Electric: ❑ 120 ❑ 220 ❑ 440 ❑ Other _____
Chimney: ❑ Masonry ❑ Triple Wall ❑ B Vent ❑ Other _____
Bathrooms: Number of Existing Full ____ Existing 1/2 ____ New Full ____ New 1/2 ____
Bedrooms: Number of Existing ____ New ____
Parking: Number of Existing Outdoors ____ Existing Enclosed ____ New Out ____ New Enclosed ____
Other _____

(8) Site: Elevation ____ Above Road Grade ____ Level ____ Below ____
Lot Size: Front ____ Rear ____ Side ____ Side ____ =
Total Acres ____ Total Sq. Ft. of Property ____ Sq. Ft.

(9) Building: Height of Building ____ ft. Size Proposed Building ____ ft. x ____ ft. = ____ Sq. Ft.
# of Stories ____ Size Existing Building ____ ft. x ____ ft. = ____ Sq. Ft.
Total Sq. Ft. of Building ____ Sq. Ft.

(10) Set Backs:

	Existing	Proposed		Existing	Proposed
Front Yard	____ ft.	____	Side Yard	____ ft.	____
Rear Yard	____ ft.	____	Side Yard	____ ft.	____

(11) Contractor Name _____
Address _____
Telephone # _____

(12) Total Project Cost $ _____

(13) Anticipated Completion Date _____

Worker Comp. ❑ Yes ❑ No ❑ NA Disability Ins. ❑ Yes ❑ No ❑ NA

(14) I affirm under penalty of perjury, that the statements made in this application are true, and that the work shall be performed in compliance with the Town of Rose Zoning Law, the New York State Uniform Building and Fire Prevention Code, the Town of Rose Building Law, and all other applicable Federal, State and local laws, ordinances, rules and regulations.

Failure to comply with such laws, ordinances, rules, and regulations or inaccuracies in this application shall be adequate grounds for this permit being suspended or revoked. You shall notify this office of any change in plans.

Inspections of footings, foundation, framing, electrical, plumbing, insulation, heating and venting are required. A certificate of occupancy or compliance is required for all work. Permit expires one year from date of issuance. Permission is hereby given to the Building Inspector to enter in or on said property for inspection purposes.

Date of Application _____ Signed: _____

OFFICE USE ONLY

Date Application Rejected _____ ❑ No Action ❑ Special Permit ❑ Area Variance ❑ Use Variance
ZBA # _____
ZBA Decision _____ Date of ZBA Decision _____ ZBA Fee $ _____
Conditions: _____

Notes:

Zoning $ _____
Building $ _____
Sq. Foot $ _____
Fee $ _____
Total $ _____

Issued By: _____ Date Issued _____

OFFICE USE ONLY