

(TOWN, VILLAGE) OF _____
Circle One

APPLICATION FOR BUILDING PERMIT

Applicant: _____

Address: _____

Phone(Home): _____ (Cell:) _____

Tax Map Section: _____ Block: _____ Lot: _____

Application Date: _____ FEE: _____

Approved: _____ Disapproved: _____

Zoning: Variance Required? _____ Special Use Permit? _____

Zoning Board Approval/Disapproval Date: _____

Other Board Approval/Disapproval Date: _____

Inspections Required for Certificate of Occupancy (signed by inspector)

Site Plan Review: _____ Date: _____

Foundation: _____ Date: _____

Framing: _____ Date: _____

Insulation: _____ Date: _____

Plumbing: _____ Date: _____

Electrical: _____ Date: _____

Well/Septic: _____ Date: _____

Final: _____ Date: _____

Health Department Review Required? _____ Date Completed: _____

Certificate of Occupancy # _____ Certificate of Compliance # _____

Date: _____

Name: _____
Building Address: _____
Permit for: _____
Permit No.: _____
Date Issued: _____

(TOWN, VILLAGE) OF _____

Circle One

APPLICATION FOR BUILDING PERMIT

Note: No permit for new construction will be issued unless this application is properly filled out. One set of plans, specifications, and a plot plan (see page four) must be submitted with this application.

INSTRUCTIONS

1. This application is to be filled out by typing or printing and must be submitted to the Building and Zoning Officer of the _____ of _____.
2. The work covered by this application shall not be commenced before issuance of a Building Permit by the Building and Zoning Officer.
3. Upon approval of this application, a Building Permit will be issued to the applicant by the Building and Zoning Officer. The Building Permit shall be posted upon the premises in a conspicuous place so as to be visible from the street throughout the period of construction.
4. No structure or use for which a Building Permit has been issued shall be occupied or used in whole or in part upon completion for any purpose until a Certificate of Occupancy shall have been granted by the Building and Zoning Officer.

Owner (if different from applicant)

Name: _____

Address: _____

Phone:(Home) _____

Phone:(Cell) _____

Contractor: _____

Address: _____

Phone:(Home) _____

Phone:(Cell) _____

Certificates Received? General Liability _____ Workers' Compensation _____ Disability _____
(Last two not required for sole proprietorships or partnerships without employees)

AFFIDAVIT

STATE OF NEW YORK

SS:

COUNTY

I swear that to the best of knowledge and belief the statements contained in this application, together with the plans and specifications submitted, are a true and complete statement of all proposed work to be done on the described premises and that all provisions of the Building Codes and Zoning Codes and all other laws pertaining to the proposed work shall be complied with, whether specified or not, and the such work is authorized by the owner.

Signature of Owner _____ Date _____

Signature of Contractor _____ Date: _____

Sworn before me this _____ day of _____ 20____,

NOTARY PUBLIC

CONSTRUCTION INFORMATION

New Construction _____ Addition _____ Alteration _____

Other (please explain) _____

Location _____

(Street number and name)

Size of Lot _____ x _____ x _____ Zoning of Location _____

Cost of Project _____ Size (square feet) _____ # of Families _____

Date Work to Start _____ Date of Completion (Approximate) _____

Building Type _____

Intended Use _____

Foundation Type _____ Roof Material _____

Exterior Walls _____ Interior Walls _____

Heating Facilities _____ Chimney Construction _____

Water Source: Well _____ Municipal _____ Engineer's Stamp: _____

Sewage Disposal: Public _____ Private _____ Perc _____

Driveway Required? _____ Date _____ Highway Sup. _____

Parking Lot Permit _____ Sign _____ Flood Plain _____

If Modular, HUD _____ NYS _____

Model Number _____ Serial Number _____ Year _____

State Permits Required?

SEQRA _____ Wetlands _____ Storm Sewer _____

Right-of-Way Permit _____ UFPO # _____

Solid Fuel Burning Appliance:

Make and Model Number: _____

Material Under Appliance: _____

Material on walls behind Appliance: _____

Manufactures recommended:

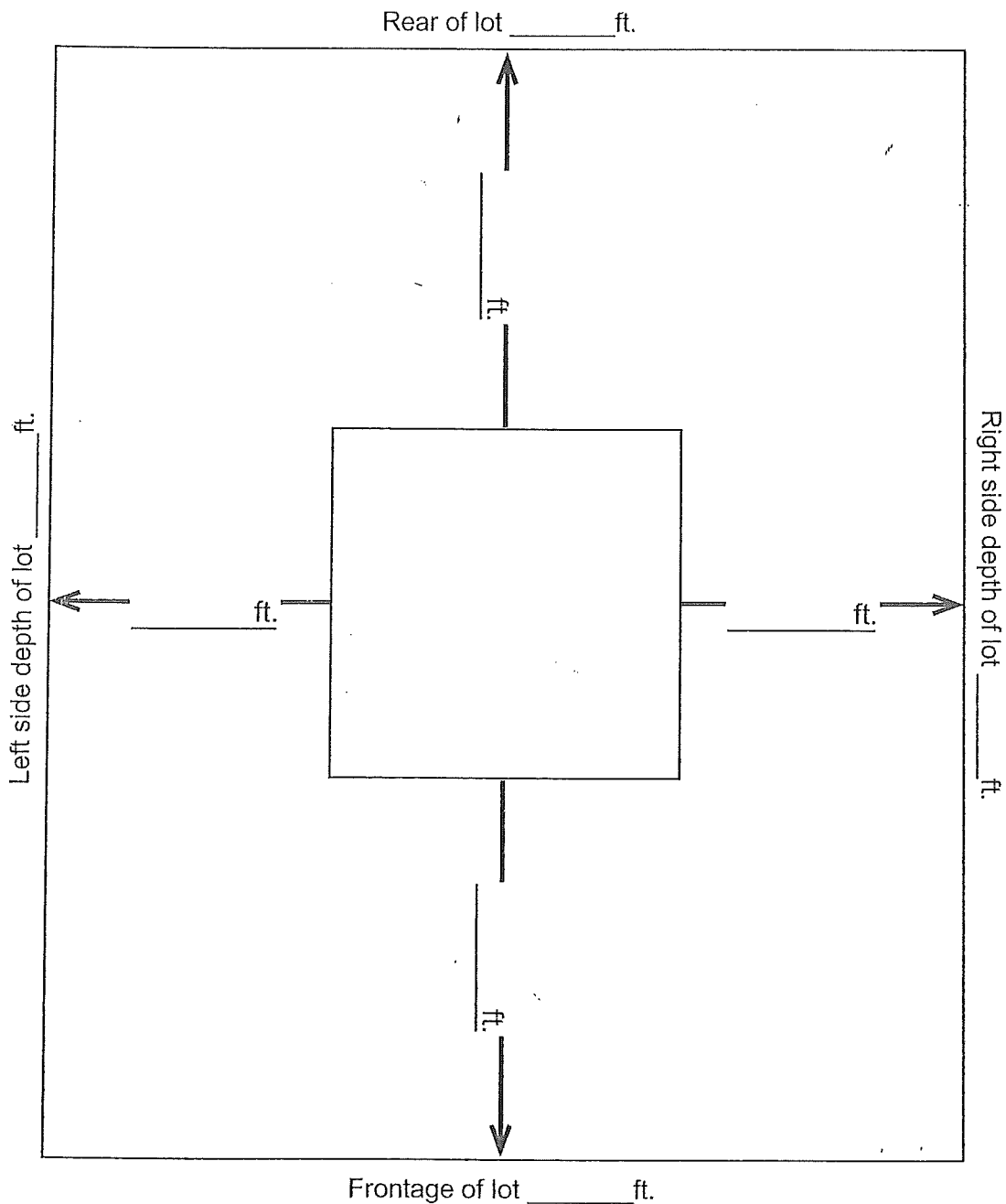
Distance from nearest walls: _____ Flu Size: _____

UFPO-IT'S THE LAW! CALL BEFORE YOU DIG: 1-800-962-7962

PLOT PLAN

1. This page shall be used for the drawing of a plot plan for all major construction and additions and in such other cases as the Building and Zoning Officer deems necessary.
2. The plot plan shall show the location and size of the lot, locations and sizes of buildings and structures upon the premises (both existing and proposed) and their relationship to adjoining premises and public streets.
3. Locate and label clearly and distinctly all buildings and structures, show widths and depths of all yards, show names of all streets and indicate north with an arrow.

SHOW DISTANCE FROM BUILDING TO SIDE, FRONT AND REAR LOT LINES



Street Name _____