TOWN OF
CAROLINE
NEW YORK

Code Enforcement Office
2668 Slaterville Road
P.O. Box 136
Slaterville Springs, NY 14881
(607) 539-6400 Ext. 3

BUILDING PERMIT APPLICATION

Tax Map No.: _____ Zoning District: _____

Property Address: _____

Owner's Name: _____

Email Address: _____ Phone No.: _____

Contractor: _____ Company: _____

Email Address: _____ Phone No.: _____

Permit Type: ☐ **RESIDENTIAL** ☐ **COMMERCIAL** ☐ **Demolition** ☐ **New Build** ☐ **Addition** ☐ **Alteration**

☐ **Garage** ☐ **Deck** ☐ **Roof** ☐ **Pool** ☐ **Generator** ☐ **Woodstove/Fireplace** ☐ **Shed** ☐ **Other**

Brief Description of Proposed Work & Use:

Estimated Cost of Project $ _____

Will your work disturb (excavation, clearing, grading etc.) ½ acre of land or more? ☐ **Yes** ☐ **No**

All building permit plans should have the following materials filed with the application:

A. Floor Pan: An overall floor plan of proposed structure indicating the position of all windows and doors and the location of the garage. Basic dimensions must be included (minimum scale ¼" = 12").
B. Plans shall also include the type of framing to be used in the structure (wood, masonry, etc.).
C. Plans must include the roof and roof rafter dimensions as well as the percent of slope or pitch.
D. Plans should include an elevation view of the various faces of the structure with height measurements included in the drawing.
E. Plans should provide a wall section with is representative of the load bearing walls of the structure. Such sections shall show the footers, foundation, floors, exterior walls, soffits, and roof assembly.
F. The plans should include the size and type of heating system as calculated on the required need of the proposed structure.
G. A copy of the Tompkins County Health Department approved septic system for the proposed site. You can contact the Tompkins County Health Dept at 607-274-6888.
H. Proof of Insurance: Contractor's General Liability and/ or Workers Compensation Form or sign off with an approved form.

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Permit Application Worksheet – Site Plan Sketch

In the space below, or on an attached plan, please provide a simple site plan sketch showing the proposed and existing structures (buildings, garage, fence, etc.) as well as the well and septic system. You may also show the information on a copy of a survey map or tax map if it is accurate.

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APPLICATION CERTIFICATION STATEMENT

I am the owner or hired contractor of the property described in this application. I hereby apply for a permit to perform the work described in the application and on the attached plans, specifications, and other documents. I will comply with all provisions of applicable ordinances, codes, and regulations in the performance of this work whether specified herein or not.

Any amendment to this application, plans, specifications, or other documents upon which this permit was issued will be filed with the Building Department for approval BEFORE such changes are made in the actual work.

I hereby request that all work be inspected and approved by the appropriate inspectors and that the work be performed in a timely manner to obtain a Certificate of Compliance or Occupancy (as appropriate).

I understand that the granting of any permit creates no liability on the part of the Town of Caroline, and by acceptance of any permit, agree to indemnify and hold harmless the Town from any and all claims for personal injury and property damage arising from the operations of or construction by permittee.

By my signature I certify that I have read and understand the above paragraph.

OWNER SIGNATURE: _____ Date: _____

Contractor Signature (if applicable): _____ Date: _____

FOR TOWN USE ONLY

Date received by CEO: _____ Fee Amount: $_____ CEO Initials: _____

PAID ☐ Cash ☐ Check No.: _____ ☐ Received by Town Clerk Receipt #: _____

☐ **APPROVED** **BUILDING PERMIT #:** _____