City of Glens Falls
Department of Building & Codes
230 Dix Avenue – Second Floor
Glens Falls, New York 12801
(518)761-3848 | Fax (518) 633-1892
buildingcodes@cityofglensfalls.com

Instructions for Completing Building Permit Application

A building permit is needed before any general construction, repair, rehab, gutting, or other work may be done. Project-specific building permit applications may be available. Additional documentation is required for specialized work such as electric or plumbing work which requires a license. Please refer to our website or ask our staff if you have any questions about what permits your project requires.

BEFORE SUBMITTING YOUR APPLICATION, PLEASE MAKE SURE YOU COMPLY WITH THE FOLLOWING:

- An application for a building permit, or any amendment thereto, **must** include information sufficient to enable the code enforcement official to determine that the intended work accords with the requirements of the Codes.
- This application shall be **completed** and **signed** by the property owner and the applicant, and submitted to the Building Department.
- This application **must** be accompanied by an **electronic** and **paper copy** of the following:
  - **Plot/site plan showing:**
    (a) Existing and proposed buildings or structures on the lot and their distances to one another as well as to the lot lines and all other pertinent details of the property.
    (b) Existing and proposed drainage, utilities, and other natural features including, but not limited to, wetlands, floodplains and wooded areas, if applicable.
    (c) Temporary and permanent sediment and erosion control measures, proposed grading and drainage features, if applicable.
  - **Liability insurance coverage**:
    (a) For contractors acting in the capacity of a general contractor, $1,000,000 minimum each occurrence, with the City of Glens Falls named as the Certificate holder.
    (b) For property owners, if there is no contractor participation in the project, proof of insurance must be provided with the level of insurance being contingent upon the project.
  - **Proof of compliance with the mandatory coverage provisions of the Workers' Compensation Law and Disability Law**.
    (a) Certificate of workers compensation insurance, on either the State approved **C-105.2** form or the **U-26.3** form **AND** certificate of disability insurance, on either the State **DB-120.1** or **DB-155** form *OR*
    (b) Certificate of workers compensation/disability exemption **CE-200**, site specific.
  - Fees required by the City of Glen Falls as calculated by the building department, shall be paid by check, money order, or cash.
- Work covered by this application shall not commence prior to permit issuance and does not encompass work that would otherwise be required by a building permit.
- Any deviation from approved plans must be authorized by the approval of revised plans subject to the same procedure established for the examination of the original plans by the building department, including any required fees.
- Building Department shall be notified (minimum notice – **48 hours** in advance) according to the required schedule of inspections.
- The permit is effective for **one year** from the date of issuance. Roofing permits are effective for **six months** from the date of issuance.

IMPORTANT - PLEASE TAKE NOTICE

⇨ ALL APPLICATIONS MUST BE ACCOMPANIED BY **THREE (3) 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 INCLUDE:**

- New residential construction - 1,500 gross sq. ft. or less
- Alterations costing $20,000 or less, which do not involve structural changes or affect public safety.
- Buildings for residential **storage** purposes of **100** square feet or less, do not require building permits, but may be subject to local zoning setbacks from buildings/structures and property lines.
- Farm buildings, including barns, sheds and other buildings used directly and exclusively for agricultural purposes.

IF YOU HAVE ANY QUESTIONS - CONTACT THIS OFFICE FOR AN APPOINTMENT

INCOMPLETE APPLICATIONS MAY BE CANCELLED

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Clear Form

Building Permit Application

DATE: _____

PERMIT No.: _____

Application is hereby made to the City of Glens Falls Building Department for the issuance of a Building Permit for construction as herein described, pursuant to provisions of the Code of the City of Glens Falls. The owner and the applicant hereby agree to comply with all applicable laws, ordinances and regulations and with all regulations and procedures as explained in this application, and will allow all inspectors to enter the premises for all required and necessary inspections.

Project Location: _____ ☐ CITY ☐ OTHER
STREET / ADDRESS
TAX MAP SECTION _____ BLOCK _____ LOT _____

APPLICANT IS: ☐ OWNER ☐ ARCHITECT/ENGINEER ☐ BUILDER/CONTRACTOR ☐ OTHER: _____

APPLICANT:
NAME: _____
MAILING ADDRESS: _____
_____
_____
HOME / OFFICE PHONE #: _____
CELL PHONE #: _____
EMAIL: _____

OWNER (IF DIFFERENT THAN APPLICANT):
NAME: _____
MAILING ADDRESS: _____
_____
_____
HOME PHONE #: _____
CELL PHONE #: _____
EMAIL: _____

IF OWNER / APPLICANT IS A CORPORATION GIVE THE NAME AND TITLE OF TWO OFFICERS:
Name: _____ Title: _____
Name: _____ Title: _____

OCCUPANCY: CHECK APPROPRIATE BOX(S)

RESIDENTIAL	USE		COMMERCIAL (DESCRIBE)	USE
☐ ONE- & TWO-FAMILY DWELLING	RES	☐ BUSINESS		GROUP B
☐ TOWNHOUSE	RES	☐ MERCANTILE		GROUP M
☐ NON-TRANSIENT DWELLING UNITS CARE FACILITIES/LODGING HOUSES	R3	☐ FACTORY		GROUP F
		☐ STORAGE		GROUP S
☐ TRANSIENT OCCUPANCIES	R1	☐ ASSEMBLY		GROUP A
☐ PERMANENT OCCUPANCIES	R2	☐ INSTITUTIONAL		GROUP I
☐ ADULT RESIDENTIAL CARE (NOT MORE THAN 16 OCCUPANTS)	R4	☐ MISCELLANEOUS		GROUP U
		☐ OTHER		GROUP __

NATURE OF PROPOSED WORK: (CHECK ANY THAT APPLY) ESTIMATED COST (EXCLUSIVE OF LAND)

	DESCRIBE	COST
☐ CONSTRUCTION OF A NEW STRUCTURE		
☐ ADDITION TO EXISTING STRUCTURE		
☐ ALTERATION TO EXISTING STRUCTURE		
☐ CHANGE OF OCCUPANCY / USE		
☐ OTHER (SEE PROPOSED BUILDING INFORMATION SECTION)		

ENGINEER, ARCHITECT, AND/OR (SUB) CONTRACTORS: ☐ CHECK IF OWNER BUILT

NAME	PHASE OF WORK	PHONE	EMAIL

Information on construction documents:

Construction documents shall clearly define the complete scope of the proposed work; shall be of sufficient clarity to indicate the location, nature and extent of the proposed work; shall show in detail that the proposed work will conform to the provisions of the Uniform Code, the Energy Code, and other applicable codes, laws, ordinances, and regulations; and shall include any and all additional information and documentation that may be required by any provision of the Code.

Existing/Proposed Building Information

Complete Only Those Items that Apply

Foundation Type:
☐ Pier ☐ Frost Wall ☐ Full Foundation Wall ☐ Monolithic or Floating Slab ☐ Slab

Foundation Material:
☐ Stone ☐ Concrete ☐ Wood ☐ Insulated Concrete Forms ☐ Other: _____

Basement Information:
☐ Crawl Space ☐ Walk Out ☐ Finished ☐ Storage ☐ Bedrooms ☐ Laundry

Building Construction Type:
☐ Concrete ☐ Steel ☐ Brick ☐ Stone ☐ Wood ☐ Other: _____

Building Exterior:
☐ Wood ☐ Stone ☐ Brick ☐ Metal ☐ Shingles ☐ Vinyl ☐ Concrete ☐ Composition
☐ Stucco ☐ Other: _____

Building Roof:
☐ Wood ☐ Stone ☐ Metal ☐ Shingles ☐ Rubber ☐ Other:

Building Heating & Cooling:
☐ Hot Air ☐ Hot Water ☐ Electric ☐ Oil ☐ Gas ☐ Radiant ☐ Solar ☐ Wood
☐ Geothermal ☐ Central Air ☐ Other: _____

Water Supply:
☐ Public ☐ Individual ☐ Type: ☐ Drilled ☐ Surface Water ☐ Well Point
☐ Spring ☐ Dug Wells ☐ Shore Wells

Sewage:
☐ Public ☐ Holding Tank Size: _____ Gallons ☐ Septic Tank _____ Gallons
Number of Trenches _____ Width of Trenches _____ Length of Trenches _____
Percolation Rate _____ Min/Inch Depth to Boundary Layer or water table _____

Additional: (Write number or value of each or N/A for not applicable)
Square Feet of: Basement: _____ 1st Floor: _____ 2nd Floor: _____ 3rd Floor: _____
Bedrooms: _____ Rooms: _____ Full Bathrooms: _____ Half Bathrooms: _____
Fireplaces: _____ Solar Panels: _____ Kitchens: _____ Pools: _____

Proposed Building Information: (Complete all that apply)

☐ New Structure ☐ Addition ☐ Alteration ☐ Renovation ☐ Repair ☐ Foundation
☐ Reroofing ☐ Attached Garage ☐ Detached Garage ☐ Deck ☐ Sign ☐ Fence
☐ Open Porch ☐ Covered Porch ☐ Enclosed Porch ☐ Pool Fence ☐ Above Ground Pool
☐ In Ground Pool ☐ Other: _____

Manufacturer's Installation Instructions.

Manufacturer's installation instructions, as required by any applicable provision of the Uniform Code or by any applicable provision of the Energy Code, shall be available on the job site at the time of inspection.

The construction documents submitted with the application for a building permit shall be accompanied by a site plan showing the size and location of new construction and existing structures on the site and distances from lot lines. In the case of demolition, the site plan shall show construction to be demolished and the location and size of existing structures and construction that are to remain on the site or plot. The building official is authorized to waive or modify the requirement for a site plan where the application for building permit is for alteration or repair or where otherwise warranted. Attach approved site plan, if applicable.

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 SETBACK DISTANCES FROM STREET(S)/ROAD(S) AND ADJACENT PROPERTY LINES. (ATTACH ADDITIONAL PAGES IF MORE SPACE IS NEEDED).

Rules and Acknowledgments

All work shall conform to the Code of the City of Glens Falls and must be completed within 12 months of the date of the building permit issuance, or a new permit shall be obtained by the Applicant.

I, the undersigned, understand that the permit which may be issued pursuant to this application is issued on the assumption that all of the representations made on this permit application are true and accurate. I have read and understand the provisions of the City of Glens Falls Code, NYS Building Code and related Rules and Regulations and will comply with said requirements. I understand that if any of the information on this form is found to be untrue or inaccurate, or if the work initiated pursuant to a permit is granted based on the representations made on this application is not completed in accordance with the representations made on this permit application, then the permit may be revoked without notice to myself, the contractor, or any other party.

SIGNATURE OF APPLICANT _____ DATE:_____

SIGNATURE OF PROPERTY OWNER _____ DATE:_____

FOR STAFF USE ONLY:

DATE/TIME APPLIED_____ RECEIVED BY_____

ZONING OFFICER APPROVAL_____BUILDING DEPARTMENT _____

DATE ISSUED/DENIED_____ EXPIRATION DATE _____

Notes: _____

_____