

BUILDING PERMIT APPLICATION

NUMBER _____

READ INSTRUCTIONS ON REVERSE BEFORE COMPLETING THIS APPLICATION

1/APPLICANT'S NAME _____ DAYTIME PHONE NUMBER _____
STREET ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

2/APPLICANT IS (CHECK ONE OR MORE)
 PROPERTY OWNER GENERAL CONTRACTOR OTHER (SPECIFY) _____

3/PROVIDE PROJECT LOCATION INFORMATION FOR THE FOLLOWING:
A-COUNTY _____ D-STREET OR DIRECTIONS _____
B-CITY, TOWN, VILLAGE _____
C-TAX MAP NO. _____

4/PROVIDE NAMES, ADDRESSES AND TELEPHONE NUMBERS FOR ANY INDIVIDUALS NAMED BELOW
A-OWNER _____ B-ARCHITECT AND/OR ENGINEER, IF ANY _____ C-GENERAL CONTRACTOR BUILDER _____

5/CONTRACTOR INSURANCE -
WORKER'S COMPENSATIONS AND DISABILITY BENEFITS SECURED BY CONTRACTOR YES NO NO WAGES TO BE PAID

6/PROJECT COST ESTIMATE (SEE INSTRUCTIONS)

7/CHECK ALL BOXES THAT APPLY TO THE NAMED PROJECT:

- A -NATURE OF WORK -
- | | | | |
|--|---|-------------------------------------|--|
| <input type="checkbox"/> NEW HOUSE/BLDG | <input type="checkbox"/> GARAGE/CARPORT | <input type="checkbox"/> ADDITION | <input type="checkbox"/> CHANGE OF USE |
| <input type="checkbox"/> MOBILE HOME | <input type="checkbox"/> STORAGE SHED | <input type="checkbox"/> ALTERATION | <input type="checkbox"/> DEMOLITION |
| <input type="checkbox"/> MANUFACTURED HOME | <input type="checkbox"/> SWIMMING POOL | <input type="checkbox"/> RELOCATION | |
- B-CONSTRUCTION CLASS -
- | | | |
|---|--|--|
| <input type="checkbox"/> TYPE 1 FIRE RESISTIVE | <input type="checkbox"/> TYPE 3 HEAVY TIMBER | <input type="checkbox"/> TYPE 5 WOOD FRAME |
| <input type="checkbox"/> TYPE 2 NON COMBUSTIBLE | <input type="checkbox"/> TYPE 4 ORDINARY | <input type="checkbox"/> UNKNOWN |
- C-OCCUPANCY USE CLASSIFICATIONS
- | | | | |
|---|--|---|---|
| <input type="checkbox"/> A1 ONE FAMILY DWELLING | <input type="checkbox"/> B1 MULTIPLE DWELLING APARTMENTS | <input type="checkbox"/> C1 BUSINESS | <input type="checkbox"/> C4 STORAGE |
| <input type="checkbox"/> A2 TWO FAMILY DWELLING | <input type="checkbox"/> B2 MULTIPLE DWELLING HOTEL/MOTEL | <input type="checkbox"/> C2 MERCANTILE | <input type="checkbox"/> C5 ASSEMBLY |
| | <input type="checkbox"/> B3 MULTIPLE DWELLING SR CITIZEN | <input type="checkbox"/> C3 INDUSTRIAL | <input type="checkbox"/> C6 INSTITUTIONAL |
| | <input type="checkbox"/> B4 MULTIPLE DWELLING ADULT RESIDENTIAL CARE | <input type="checkbox"/> C7 MISCELLANEOUS | |

- 8/A - IS THE SITE WITHIN FLOOD PLAN? YES NO
- B - IS THE SITE IN WHOLE OR IN PART A DESIGNATED WETLAND? YES NO
- C - "X" ALL OF THE FOLLOWING THAT DESCRIBE THE PROVISIONS FOR WATER AND SEWER:
- | | | | |
|--|--|---|--------------------------------|
| <input type="checkbox"/> PUBLIC WATER SYSTEM | <input type="checkbox"/> NEW PRIVATE WELL | <input type="checkbox"/> PRIOR EXISTING PRIVATE WELL | <input type="checkbox"/> OTHER |
| <input type="checkbox"/> PUBLIC SEWER SYSTEM | <input type="checkbox"/> NEW SEPTIC SYSTEM | <input type="checkbox"/> PRIOR EXISTING SEPTIC SYSTEM | |

9/WHAT WILL BE THE METHOD OF PROVIDING HEAT?
PRIMARY _____ SECONDARY _____ NONE _____

10/PLANS ARE (SEE INSTRUCTIONS)
 ENCLOSED/ATTACHED SHIPPED SEPARATELY NOT SUPPLIED

11/HAS ANY WORK COVERED BY THIS APPLICATION BEEN STARTED OR COMPLETED? YES NO
*IF YES, READ INSTRUCTIONS CAREFULLY AND ATTACH A DESCRIPTION AND EXPLANATION.

APPLICANT CERTIFICATION: I hereby certify that I have read the instructions and examined this application and know the same to be true and correct. All provisions of laws and ordinances covering this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or land use or the performance of construction.

Signature of Applicant/ _____
Authorized Agent _____ DATE _____
CONSULT INSTRUCTIONS ABOUT APPROPRIATE FEE, REQUIRED PLANS AND MAILING DIRECTIONS.

AMOUNT ENCLOSED \$ _____

BUILDING PERMIT APPLICATION INSTRUCTIONS

A BUILDING PERMIT IS REQUIRED BEFORE commencing construction or other improvement, removal or demolition of any building or structure (including auction barns, farm residences and other such structures) except as noted below; and BEFORE the installation of heating equipment.

A BUILDING PERMIT IS NOT REQUIRED for necessary dimensions and schedules repairs which do NOT involve material alteration of structural features, plumbing, electrical or heating/ventilation systems; for agricultural buildings such as dairy barns and poultry houses; erecting fences, constructing non-commercial storage facilities under 140 sq. Ft.; and for replacing roofing or siding materials. (Under 25%)

ITEM INSTRUCTIONS FOR THE APPLICATION: (Items not listed are self explanatory. For further assistance, contact one of the offices listed below.)

3C. The tax map or property ID number can be obtained from the local assessor, by consulting the appropriate tax map, or through your county real property tax office. A Certificate of Occupancy will not be issued without this number.

5. Worker's compensation and disability benefits are necessary if wages are to be paid to anyone working on the project.

6. Project cost includes the material and labor costs associated with project work. Not included are architect, attorney, engineer or other fees and land acquisition costs. Project costs do include direct costs for wells, septic systems, electrical hook-ups, foundation systems, etc.

7. If unsure of class, check off UNKNOWN or refer to Part 701, 19 NYCRR. Most new single family homes are wood frame construction.

8. Your Town Clerk may be able to help you determine if the project site is in a flood plain or is designated as a wetland. If not, contact the nearest NYS Department of Environmental Conservation.

9. Enter Oil Hot Air, Oil Hot Water, Electrical Baseboard, Wood, etc., as appropriate

10. The original seal and signature of a licensed and registered architect or professional engineer must be affixed to ALL plans submitted; except residential buildings under 1,500 sq. Ft. of living area, OR for Interior alterations costing under \$10,000. Plans should include site work and landscaping, elevations, sections, and schedules.

11. Undertaking activity that requires a building permit prior to obtaining such a permit is prohibited. In considering what action, if any, to take in specific case, the Department will evaluate violations based on prior experience with the applicant and other relevant factors.

12. It is the builder's responsibility to notify the Building Inspector when the building is ready for inspection. (A set of Plans should be on site)

1st Inspection - Foundation and Septic System

2nd Inspection - Shell - Electrical and Plumbing

3rd Final Inspection - When the building is complete and a request is made for a Certificate of Occupancy.

APPLICATION FEE: The appropriate application fee in the form of a check, money order or government agency voucher made payable to the TOWN OF Sanford is required as indicated :

Cost of Proposed Activity	Application Fee
Up to \$500	No Charge
\$501 to \$2,000	\$30
\$2001 to \$25,000	\$30 for the first \$2,000 Plus \$5 for each additional \$1,000 (or fraction thereof) Up to and including \$25,000
\$25,001 and up	\$145 for the first \$25,000 Plus \$4 for each additional \$1,000 (or fraction thereof)

SEND THIS COMPLETED APPLICATION TO THE OFFICE BELOW:

Peter Hathaway
Code Enforcement Officer
Town of Sanford
91 Second St.
Deposit N.Y. 13754

EFFECTIVE APRIL 7, 1993, NEW YORK STATE WORKER'S COMPENSATION LAW REQUIRES THAT BEFORE A BUILDING PERMIT IS ISSUED THE APPLICANT MUST SUBMIT PROOF OF WORKER'S COMPENSATION AND DISABILITY BENEFITS OR SUBMIT A STATEMENT THAT THEY DO NOT REQUIRE THESE COVERAGES.