

Tax Map # _____

TOWN/ VILLAGE OF NUNDA

Permit # _____

Application for a Building/Zoning Permit

NOTE: INCOMPLETE OR MISSING INFORMATION AND OR DOCUMENTATION REQUIRED WILL DELAY OR DENY PROCESSING OF PERMITS NO PERMITS WILL BE ISSUED WITH OUT COMPLETED APPLICATION. THE APPLICATION MUST BE SIGNED IN BOTH REQUIRED SPACES

INSTRUCTIONS:

A. The Approval Process requires (2) weeks on average. The work covered by this application shall not commence BEFORE the issuance of a Building Permit.

B. COMPLETED copy of this application submitted to the Code Enforcement Office.

C. COMPLETE set of STAMPED Architectural Drawings, for any Construction / Addition / Renovation / Rehab. with a cost of \$20,000 or more. A Plot Plan must be included with the application.

D. Upon approval of this application, the Code Enforcement Officer will issue a Building Permit to the applicant, however building permits are always made out to the property owner of record.

**The permit shall be kept on display at the premises for the duration of the work
Building Permits expire in ONE (1) YEAR from issue date.**

E. Code Enforcement shall have the right to enter the premises for the purpose of inspection of the construction covered by this application at any time during the construction period without notice.

F. NO Building shall be occupied or used in whole or in part for any purpose until a CERTIFICATE OF OCCUPANCY has been granted.

APPLICATION IS HEREBY MADE to the Code Enforcement Office for the issuance of a Building Permit, pursuant to the Zoning Ordinance of the Town of Ossian for the construction as herein described. The applicant agrees to comply with all applicable laws, ordinances, and regulations.

Part 1: GENERAL INFORMATION

1. Owner Identification

Name: _____

Address: _____

City, State, Zip: _____

Phone Number: _____

2. Project Location and Information

Applicant's Name: _____

Address: _____

City, State, Zip: _____

Phone Number: _____

3. Zoning District _____

Email Address: _____

Does the Proposed construction conform to current Town zoning law & Regulations Yes No

If no, please describe: _____

4. Type of Construction, Improvement, or Zoning Change (Check all that apply)

*Please note additional forms may be required to be completed depending on application type

Use Variance Area Variance Sub-Division Special Use

Single Family Home. Single Family mobile home (Double wide) (Single Wide).

Single Family Home (Includes single & double wide mobile Homes)

Multi Family Home.

New Building – Proposed Use is _____

Conversion – Current use is _____ Proposed Use is _____

Addition Alteration Repair/Replacement Relocation Demolition

Misc. Structure or Equipment (I.e. Sheds, New or additional electrical services, -
Fire place Inserts, Free standing wood, gas, coal or pellet stoves)

SIGNS New Furnace Hot Water tank Swimming Pool (Above & in Ground)

5. Description of Proposed Project: _____

Dimensions of: New Structure _____ **Area** _____ **Sq. Ft.**

Additions: _____ **Area** _____ **Sq. Ft.**

Alterations: _____ **Area** _____ **Sq. Ft.**

6. Estimated Project Cost:

Contractors Estimate for the work to be performed: _____

Estimate if work is to be performed by Homeowner: _____

Part 2 Designers and Contractors:

**** ALL CONTRACTORS A COPY OF YOUR LIABILITY & WORKER'S COMPENSATION INSURANCE CERTIFICATION or CE-200 EXEMPTION FORM MUST ACCOMPANY THIS FORM. See page 4.**

1. Architect/Engineer:

Name: _____

Address: _____

City, State Zip: _____

2. General Contractor:

Name: _____

Address: _____

City, State, Zip: _____

3. Electrical Contractor:

Name: _____

Address: _____

City, State, Zip: _____

4. Plumbing Contractor:

Name: _____

Address: _____

City, State, Zip: _____

5. Mechanical Contractor

Name: _____

Address: _____

City, State, Zip: _____

6. Contractor:

Name: _____

Address: _____

City, State, Zip: _____

I I Home owner performing all Work Check here.

Part 3: Project Location and Details

Please include a set of plans or drawings of the project. The Drawing must include the following:

Note: Any new single family or Multi family home or dwelling over 1500 SQFT must have a set of NYS Stamped Plans All other projects require a set of drawings with materials list & plot map

1. Location of the proposed structure or addition showing the number of stories and all exterior dimensions
2. The distance of the proposal from all plot lines;

3. The distance of the proposal from any structure including neighboring structures
 4. The Depth of the proposed foundation or footers;
 5. The maximum percentage of the lot to be covered by building(s);
 6. **Addition** will be used as: Family Room; Kitchen; Full Bath; Half Bath; Bedroom; Living Room; Den; Other_____.
 7. **Basement:** Full; Partial; Crawl; Pier; Slab
 8. **Garage:** Attached; Detached
 9. **Utilities:** Electric; Gas; other:_____
 10. **Deck / Porch:** Open; Covered; Enclosed; Screened; Other:_____
 11. Site plan within a flood plain: Yes No
 12. Sewage Disposal System Approved: Pre existing Yes (Attach Copy of approve county permit No
 13. Water Supply: Public; Private; Tested: Yes No
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IMPORTANT NOTICES: READ BEFORE SIGNING

1. Work conducted pursuant to a building permit must be visually inspected by the Code Enforcement Official and must conform to the New York State uniform fire prevention and Building code, The Code Ordinances of Village of Nunda and all other applicable codes, rules or regulations.
2. It is the **OWNERS RESPONSIBILITY TO CONTACT THE CODE ENFORCEMENT OFFICIAL AT 585- 519 -3321 AT LEAST 24 HOURS BEFORE THE OWNER WISHES TO HAVE AN INSPECTION CONDUCTED. This is especially true for "Internal work", which will eventually be covered from visual inspection by additional work (i.e. electrical work) later to be covered by a wall.**
3. All electrical work will be inspected by a third party electrical inspector approved by the Code Enforcement official (Homeowner will be subject to all Inspection fees at time of inspection) *Work will not continue until CEO has Notification from electrical inspector.
4. OWNER HEREBY AGREES TO ALLOW THE CODE ENFORCEMENT OFFICIAL TO INSPECT THE SUFFICIENCY OF THE WORK BEING DONE PURSUANT TO THIS PERMIT, PROVIDED HOWEVER, THAT SUCH INSPECTION(S) IS (ARE) LIMITED TO THE WORK BEING CONDUCTED PURSUANT TO THIS PERMIT AND ANY OTHER NON WORK – RELATED VIOLATIONS WHICH ARE READILY DISCERNIBLE FROM SUCH INSPECTION(S)
5. **** New York State law requires contractors to maintain Worker’s Compensation and Disability Insurance for their employees. No Permit will be issued unless currently valid worker’s Compensation and Disability insurance certificates are attached to this application. If the contractor believes he/she is exempt from the requirements to provide Worker’s Compensation and/or Disability Benefits, the contractor must complete a CE-200 Form and attach it with this application, and return to the CEO at time of filing the application.**

6. A Certificate of Occupancy or Compliance will be issued on all projects after full compliance and final inspection is completed.

7. This permit does not include any privilege of encroachment in, over, or upon any town, county, or state road or right-of-way.

8. The Building permit card must be displayed so as to be visible from the road or street nearest to the site of work being conducted.

9. This building permit will become null and void unless construction has started within 120 days of the date of issuance. All Permits shall expire one year from date of issuance, or upon issuance of a C of O or C of C. The permit upon request may be renewed for a period of one Year provided that (1) the permit has not been revoked or suspended at the time of request for renewal; (2) the relevant information in the application is up to date; (3) The permit is no more than fifteen (15) Days past its expiration date. A renewal fee will be charged upon renewal of any permit as set by the Town/village of Nunda Fee Schedules.

10. In issuance of the permit, the town assumes no responsibility regarding the performance or quality of work, except as provided by law.

I _____, the above named applicant, hereby attest that I am the lawful owner of the property described within or am the lawful agent of said owner and affirm under penalty of perjury that all statements made by me on this application are true, and that I am duly authorized to make and file this application and that I understand and agree to the terms above.

Signature

Date

DO NOT WRITE BELOW THIS LINE OFFICIAL USE ONLY

Special approval needed by: Planning Board Zoning Board County planning Board

Planning Board Recommendations / Action

Zoning Board Recommendations / Actions

Date _____ Approve _____ Deny _____

Date _____ Approve _____ Deny _____

Chair _____

Chair _____

Member _____

CEO / ZEO use only

Approved: _____

Date: _____

FEES

Nature of Work: _____ \$ _____

Nature of Work: _____ \$ _____

Additional Fees or Penalties: _____ \$ _____

Zoning Fees: _____ \$ _____

Special use permit fees: _____ \$ _____

TOTAL FEES \$ _____

Permit Number: _____ Issue Date: _____ Expiration Date: _____

Renew Date: _____

**NOTICE OF UTILIZATION OF TRUSS TYPE CONSTRUCTION,
PRE-ENGINEERED WOOD CONSTRUCTION AND/OR TIMBER CONSTRUCTION IN
RESIDENTIAL STRUCTURES**

(In accordance with Title 19 NYCRR PART 1265)

*TOWN/VILLAGE of Nunda
4 Massachusetts street P.O. Box 537
Nunda NY 14517*

TO: Town / Village of Nunda Code enforcement official

OWNER OF PROPERTY: _____

SUBJECT PROPERTY (ADDRESS AND TAX MAP NUMBER):

PLEASE TAKE NOTICE THAT THE (CHECK ALL THAT APPLY):

- New Residential Structure
- Addition to Existing Residential Structure
- Rehabilitation to Existing Residential Structure

TO BE CONSTRUCTED OR PERFORMED AT THE SUBJECT PROPERTY REFERENCE ABOVE WILL UTILIZE (check each applicable line):

- Truss Type Construction (TT)
- Pre-Engineered Wood Construction (PW)
- Timber Construction (TC)

IN THE FOLLOWING LOCATION(S) (CHECK APPLICABLE LINE):

- Floor Framing, Including Girders and Beams (F)
- Roof Framing (R)
- Floor Framing and Roof Framing (FR)

SIGNATURE: _____

DATE: _____

PRINT NAME: _____ **CAPACITY**

(Check One): Owner Owner's Representative