

## Instructions for a Building Permit

### 1. Building Permit application:

- Survey map or plot diagram
- Two (2) sets of New York State certified engineer/architectural stamped plans
- NYS Energy Code compliance will require a REScheck or a COMcheck for all new residential structures and additions that will be used for occupancy.
- Contractors Workmen's Compensation Insurance or a signed Liability Waiver
- Septic system permit from Livingston County Health Department if applicable
- Driveway permit if applicable
- Fee for the permit application is due upon approval of the building permit application and issuance of the building permit.
- Flood Plain application and permit where applicable.

2. Code Enforcement Officer (CEO) has 1 week to review plans and approve or disapprove them. Compliance with Town Zoning will be determined during the review process. Proposed changes to approved plans will require approval of the CEO. Disapproved plans will be referred to the Zoning Board upon request of the Applicant.

### 3. Building permits are required for the following:

- Residential: Remodeling that includes electrical, plumbing, structural changes, or changes in the outside size, shape, or appearance. This may include some door and window placements/replacements.
- All commercial work
- All structures including pools, sheds over 170 sq. ft., and additions
- Construction of all chimneys, installation of fireplaces and wood, pellet, or coal stoves.
- Demolition of structures

### 4. Building permits are not required for the following:

- Residential work that does not include electrical, plumbing, or structural change.

5. Upon completion of the project, a Certificate of Occupancy or Certificate of Compliance will be issued by the CEO

Permit No. \_\_\_\_\_

Permit Issued \_\_\_\_\_

Permit Expires \_\_\_\_\_

Zoning District \_\_\_\_\_

Tax Map Number # \_\_\_\_\_

## APPLICATION FOR ZONING/BUILDING PERMIT Town of Conesus, County of Livingston, New York

### INSTRUCTIONS:

1. This application must be completely filled in by typewriter or in ink and submitted to the Building Department with permit fee.
2. A land survey map showing location of lot and of buildings on premises, relationship to adjoining properties and street frontage may be required. A plot diagram may be substituted upon Building Department approval.
3. Actual work may not commence until issuance of building permit. Such permit shall be displayed on premises available for inspection through the progress of the work.
4. Submit 2 sets of plans and specifications with architect stamp seal if required.
5. Work under \$20,000 does not need architectural stamp or seal unless the work involves structural changes.
6. No building shall be occupied or-used until a Certificate of Occupancy has been issued by Building Department.
7. After approval of application, changes or alterations are prohibited unless Building Department approves. An additional permit fee may be charged predicated on the extent of the variation from the original plans.
8. This application is valid for one year, but may be extended for 3 months.
9. All building permits are required to be closed out with the issuance of a Certificate of Compliance or a Certificate of Occupancy.
10. It is the responsibility of the applicant/owner to contact the Building Department to conduct inspections during construction and upon completion of project.
11. New construction within Conesus Lake Watershed involving grading shall be referred to the Conesus Lake Watershed Inspector.

**PROPERTY OWNER:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Town/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**APPLICANT (if not property owner)** \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Town/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

### PROPOSED CONSTRUCTION LOCATION

Address: \_\_\_\_\_

Fire District: \_\_\_\_\_

Nearest Intersecting Road: \_\_\_\_\_

Subdivision Name: \_\_\_\_\_

### LOT INFORMATION

Lot Dimensions: \_\_\_\_\_ feet wide \_\_\_\_\_ feet deep

Lot Area: \_\_\_\_\_ square feet \_\_\_\_\_ acres

### NEW CONSTRUCTION (if applicable)

Flood Plain \_\_\_\_\_

Panel # \_\_\_\_\_

- Public Water Hookup       Public Sewer Hookup  
 Private Water               Private Sewer

**NATURE OF WORK**

- Construction of New Building
- Addition to a Building - Size & Use \_\_\_\_\_
- Alteration to a Building - Describe \_\_\_\_\_
- Demolition of a Building - Describe \_\_\_\_\_
- Move / Relocate Structures
- Installation of Oil or Gas Burner
- Installation of Plumbing
- Installation of Electrical
- Other Work - Describe \_\_\_\_\_

**NON-RESIDENTIAL STRUCTURES**

- Accessory Building Size \_\_\_\_\_
- Garage - Att'd \_\_\_\_\_ Det'd \_\_\_\_\_ Size \_\_\_\_\_
- Shed - Size \_\_\_\_\_
- Barn - Size \_\_\_\_\_
- Deck/Porch Size \_\_\_\_\_
- Fence Size \_\_\_\_\_
- Pool  Inground Size \_\_\_\_\_
- Sign
- Other Work - Describe \_\_\_\_\_

Heat Type \_\_\_\_\_

Fuel Type \_\_\_\_\_

**CONTRACTOR**

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Organization: \_\_\_\_\_

Telephone: \_\_\_\_\_

Names and Telephone Numbers of Subcontract Electrician, Plumber, and Other Subcontractors:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**CONTRACTOR COMPENSATION OR GENERAL LIABILITY CARRIER ( If Applicable)**

Name: \_\_\_\_\_

Policy # \_\_\_\_\_

**ARCHITECT/ENGINEER (If Applicable)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Professional License No: \_\_\_\_\_

State: \_\_\_\_\_

**TYPE OF DWELLING - NO. OF STORIES \_\_\_\_\_**

- Ranch Dimensions \_\_\_\_\_ Sq. Ft. \_\_\_\_\_
- Raised Ranch Dimensions \_\_\_\_\_ Sq. Ft. \_\_\_\_\_
- Split Level Dimensions \_\_\_\_\_ Sq. Ft. \_\_\_\_\_
- 1 1/2 Story Dimensions \_\_\_\_\_ Sq. Ft. \_\_\_\_\_
- 2 Story Dimensions \_\_\_\_\_ Sq. Ft. \_\_\_\_\_
- Modular Dimensions \_\_\_\_\_ Sq. Ft. \_\_\_\_\_
- Mobile Home Dimensions \_\_\_\_\_ Sq. Ft. \_\_\_\_\_  
Year \_\_\_\_\_

**OCCUPANCY & USE OF PROPERTY**

- One Family Dwelling
- Two Family Dwelling
- Multiple Dwelling # Units \_\_\_\_\_
- Commercial - Type \_\_\_\_\_
- Professional - Type \_\_\_\_\_
- Other Type - Occupancy \_\_\_\_\_
- Change in Occupancy \_\_\_\_\_

**CHIMNEY/FIREPLACE:**

Erection of Chimney UL# \_\_\_\_\_

Installation of a Fireplace or Insert UL# \_\_\_\_\_

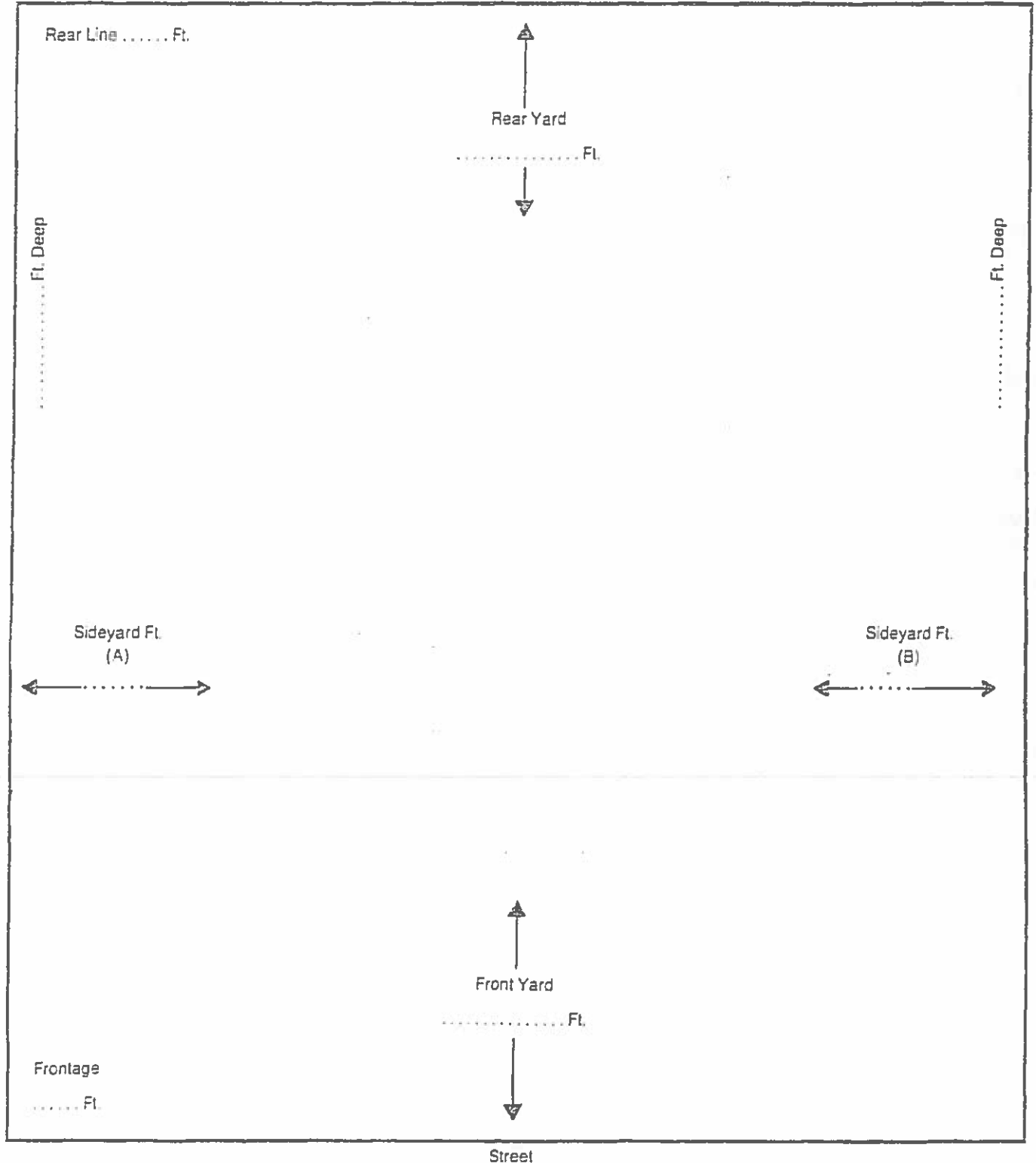
Installation of a Wood Burner UL# \_\_\_\_\_

Make of Stove/Fireplace/Insert \_\_\_\_\_

Detailed sketch of proposed construction, materials proposed and floor plan (if applicable) must be provided on additional sheet.

# PLOT DIAGRAM/SURVEY MAP

Locate clearly and distinctly all buildings, whether existing or proposed, and indicate all setback dimensions from property lines. Give identifying information or deed description, show all easements and street names, adjacent property owner names. Indicate whether an interior or a corner lot. Show any water bodies or creeks, shorelines.



**FEE INFORMATION**

Estimated Cost of Construction: \_\_\_\_\_

Floor Area: \_\_\_\_\_ Sq. Ft. \_\_\_\_\_

Fee: \_\_\_\_\_ Received: \_\_\_\_\_ By: \_\_\_\_\_

I hereby apply under the Zoning Ordinance and the Building Code of the Hamlet/Town of Conesus, New York for a permit to construct or alter a building and/or accessory structure as set forth above, and I certify that the statement herein contained are true to the best of my knowledge and belief.

I also grant the permission for the Code Enforcement Officer to enter the property and structures thereon as frequently as deemed necessary to inspect the same for the compliance of the Uniform Code.

If applicant is not the owner, please explain: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant/Owner Date

This application is hereby (Approved/Disapproved) and permission is (Granted/Refused) for the construction or alteration of a building and/or accessory structure as set for above.

\_\_\_\_\_  
Zoning Officer/Building Inspector Date

Does Use Violate Any Code: \_\_\_\_\_  
Is So Describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PETITION**  
to the Conesus Joint Board of Appeals

Dated \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed \_\_\_\_\_  
Petitioner

Action by the Conesus Joint Board of Appeals on the above stated matter:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated \_\_\_\_\_

Attest \_\_\_\_\_  
Secretary, Board of Appeals

Chairman \_\_\_\_\_  
Member \_\_\_\_\_  
Member \_\_\_\_\_  
Member \_\_\_\_\_  
Member \_\_\_\_\_