

TOWN OF OSSIAN
Livingston County, New York

APPLICATION FOR BUILDING and / or ZONING PERMIT Residential

APPLICATION DATE: _____

INSTRUCTIONS:

- A. The Approval Process requires (2) weeks** on average. The work covered by this application shall not be commenced BEFORE the issuance of a Building Permit.
- B. Two (2) COMPLETED** copies of this application submitted to the Code Enforcement Office. Any application which is missing information will be denied.
- C. Two (2) COMPLETE** sets of **STAMPED Architectural Drawings**, for any **Construction / Addition / Renovation / Rehabilitation with a cost of \$20,000 or more. A Plot Plan** showing a DETAILED description of the location and position of any existing buildings, and their position in relation to near by buildings, structures, and to any private or public streets or highways.
- D. Upon approval of this application**, the Code Enforcement Officer will issue a Building Permit to the applicant. The permit shall be kept on the premises for the duration of the work. Building Permits are good for a period of **ONE (1) YEAR** from issue.
- E. The Building Inspector** shall have the right to enter upon 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** shall have been granted by the Code Enforcement Office.

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.

1. APPLICANT / CONTRACTOR

Name _____ Tel. No. _____

Address _____

Workman's Compensation & Disability Carrier & Policy # _____

**** A COPY OF YOUR INSURANCE CERTIFICATION MUST ACCOMPANY THIS FORM ******2. PROPERTY OWNER**

Name _____ Tel. No. _____

Address _____

3. LOCATION OF LAND FOR PROPOSED WORK:

Address _____

Tax Map No. _____

Size & Area of the lot _____ ft. by _____ ft. = _____ sq. ft.

Zone Dist. _____ Class Use _____ in which premises are situated

4. PRESENT USE IS _____

PROPOSED CHANGE/USE or OCCUPANCY _____

- 5. APPLYING FOR:** _____ New Structure _____ Addition _____ Alteration / Porch (covered) / Deck
 _____ New Roof / Repair _____ Stove (any type) _____ Other (explain)
 _____ Sign / Temporary _____ Sign / Permanent
 _____ If sign permit, include over all dimensions and letter size. Sign permit fee \$ _____

6. DIMENSIONS OF: New Structure _____ Area _____ sq. ft.
 Additions _____ Area _____ sq. ft.
 Alterations / Porch (covered) / Deck _____ Area _____ sq. ft.
 New Roof / Repair _____ Area _____ no. of sq.
 Other _____ Area _____ no. of sq.

7. ESTIMATED COST OF PROJECT: \$ _____

8. Will the proposed construction require a variance from the Local Zoning Ordinance or Regulations ? _____

If yes, give details _____

Type of Variance: _____ ZBA Application Date: _____ Planning Date: _____

9. E911: _____

Does this parcel require a new address () YES () NO

10. The PLOT diagram shown on page 3 of this application or on separate drawings shall show:

- Location of any / all existing buildings on the lot
- Location of proposed construction on the lot with setbacks of Front, Side and Rear clearly shown
- Property lines and street names

11. The following criteria shall be readily available and identifiable on the submitted prints/plans:

Building Type:	SQFt. Habitable Space:	Sq.Ft NonHabitable Space:	Design Criteria :
Exits & Egresses:	Stairs:	Light/Ventilation:	Window/Door Schedules:
Smoke Detection	Separations:	Rafter Spans:	Truss Drawings:
Foundation/Footing:	Insulation:	Mechanical Req:	Plumbing Req:
Electrical Req:	Heating Systems:	Roof Construction/Covering:	Garages/decks
Solid Fuel burning Appliances:	Compliance w/NYS Energy Code	Compliance with Local Zoning Ordinances	

I, (print) _____ **HEREBY CERTIFIES** THAT HE/SHE IS THE applicant and / or owner named above; and that all statements contained in this application are true to the best of his/her knowledge and belief, and that the work will be performed in the manner set forth in this application and in the plans and specifications filed therewith.

CONTRACTOR / OWNER CERTIFICATION: I hereby certify that all items in the Fence Regulations will be enforced.

CONTRACTOR CERTIFICATION: I hereby certify that all items in the Sign Ordinance will be enforced.

Signature of Applicant / Contractor

Signature of Property Owner

APPROVED

DISAPPROVED

Code Enforcement Officer

Application is hereby made to the Zoning Board of Appeals and/or Planning Department for a Variance/Special Use Permit for the use of the premises as described above for which an application for a permit has been denied based upon the following information:

Office Use Only:

FEE(S): Building\$ _____ Planning:\$ _____ ZBA Variance:\$ _____ **TOTAL:\$** _____

PLOT PLAN and / or DISCRIPTION of WORK

A large grid of graph paper, consisting of 30 columns and 40 rows of small squares, intended for plotting a plan or describing work. The grid is empty and occupies the majority of the page below the header.

Petition to Board of Appeals

To: The Board of Appeals, Town/Village of Dansville:

Dated: _____ 20____

Signed: _____
Petitioner

Action by the Board of Appeals of the Town/Village of Dansville on the above stated matter:

Dated: _____ 20____

Attest: _____
Secretary, Board of Appeals

_____	Chairman
_____	Member
_____	Member
_____	Member
_____	Member