

TOWN OF OSSIAN  
Livingston County, New York

# APPLICATION FOR BUILDING and / or ZONING PERMIT

APPLICATION DATE: \_\_\_\_\_

**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. Any application which is missing information will be denied.
- 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. 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 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 Village / Town of North Dansville / 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 \_\_\_\_\_

**\*\* A COPY OF YOUR LIABILITY & WORKER'S COMPENSATION INSURANCE CERTIFICATION or EXEMPTION FORM 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. NATURE OF WORK: \_\_\_\_\_

7. DIMENSIONS OF: New Structure \_\_\_\_\_ Area \_\_\_\_\_ sq. ft.  
 Additions \_\_\_\_\_ Area \_\_\_\_\_ sq. ft.  
 Alterations / Porch (covered) / Deck \_\_\_\_\_ Area \_\_\_\_\_ sq. ft.  
 New Roof / Repair \_\_\_\_\_ Area \_\_\_\_\_ # of sq.  
 Other \_\_\_\_\_ Area \_\_\_\_\_ # of sq.

8. ESTIMATED COST OF PROJECT: \$ \_\_\_\_\_

9. 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: \_\_\_\_\_

10. **ALL COMMERCIAL Permits require Planning Board Review – review date** \_\_\_\_\_

11. E911: \_\_\_\_\_  
 Does this parcel require a new address ( ) YES ( ) NO

12. 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

**13. 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**

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:

\_\_\_\_\_  
 Code Enforcement Officer

**DISAPPROVED** \_\_\_\_\_

**PLOT PLAN and / or DESCRIPTION of WORK**

A large grid of graph paper, consisting of 20 columns and 30 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, Village / Town of North Dansville/ Town of Ossian:

Dated: \_\_\_\_\_ 20\_\_\_\_\_

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

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

Dated: \_\_\_\_\_ 20\_\_\_\_\_

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

_____	Chairman
_____	Member
_____	Member
_____	Member
_____	Member