

Town of Willing

Code Enforcement Office
1431 State Route 19 South
Wellsville, NY 14895
Office Phone: (585) 593-3210 FAX: (585) 593-0510
Code Officer Cell: (585) 808-6161

APPLICATION FOR BUILDING PERMIT

1. 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. COMMERCIAL - Two (2) COMPLETE sets of STAMPED Architectural Drawings, for any Construction / Addition / Renovation / Rehabilitation. A Plot Plan showing a DETAILED description of the location and position of any existing buildings, and their position in relation to nearby buildings, structures, and to any private or public streets or highways.
- D. RESIDENTIAL - Two (2) COMPLETE sets of STAMPED Architectural Drawings, for any Construction / Addition / Renovation / Rehabilitation over 1500 sq. ft. or 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 nearby buildings, structures, and to any private or public streets or highways.
- E. 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. Work must be started within 6 months of date issued.
- F. 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.
- G. 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 for the issuance of a Building Permit, pursuant to local laws of the Town of Willing for the construction as herein described. The applicant agrees to comply with all applicable laws, ordinances and regulations.

2. DESIGN PROFESSIONAL AND CONTRACTOR INFORMATION:

PROVIDE THE FOLLOWING INFORMATION FOR EACH CONTRACTOR.

A. Name, Business Name, Business Address, and Phone Numbers

B. Workers Compensation Documentation – ALL PERMITS REQUIRE ONE OF THE FOLLOWING FIVE NYSWCB DOCUMENTS BE SUBMITTED PRIOR TO THE APPROVAL OF A BUILDING PERMIT (All NYSWCB forms are submitted under penalty of perjury, a felony, carrying penalty up to four years in prison)

- 1) BP-1 Form..... If ALL work is being done by homeowner – no contractors working on project (40 hour rule) Form can be printed at www.wcb.state.ny.us
- 2) CE-200 Form.....Exemption for sole proprietor contractor that is not required to carry workers comp. Not a waiver of workers compensation (does not apply to subcontractors). Form can be completed at www.wcb.state.ny.us or call 866-546-9322 (Forms available at the Town Office)
- 3) C-105.2 Form.....For contractors covered by private N.Y.S. licensed insurance carriers (SI-12 Self Insured)
- 4) U-26.3 Form.....For businesses insured by the N.Y.S. insurance fund
- 5) DB-120.1 Form.....For businesses with Certificate of Disability Benefits (DB-155 for Self Insurance)

Attach one of the above documents for every contractor/subcontractor involved with the project.

3. PROPERTY OWNER

Name _____ Tel. No. _____
Address _____

4. LOCATION OF LAND FOR PROPOSED WORK:

Address _____
Tax Map No. _____
Size & Area of the lot _____ ft. by _____ ft. = _____ sq. ft.

5. PRESENT USE IS _____
PROPOSED CHANGE/USE or OCCUPANCY _____

6. NATURE OF WORK AND OCCUPANCY:

_____ Construction of new building ***	_____ One family dwelling	_____ Attached garage
_____ Addition to building	_____ Two family dwelling	_____ Attached garage
_____ Alteration to a building	_____ Multiple dwelling	_____ Attached garage
_____ Demolition of a building	_____ Commercial/Professional **	
_____ Installation of oil or gas burner, attach manufacturer's specifications.		_____ Other type occupancy
_____ Installation of plumbing, describe:	<u>ACCESSORY BUILDING</u>	
_____ Installation of electric*, describe:	_____ One-car detached garage	
_____ Deck _____ Roof/Re-Roof	_____ Deck Two-car detached garage	
_____ Manufactures Home		
_____ Other work, describe:	_____ Private storage building	_____ Shed

Enter description here:

_____ If demolition permit needed, STOP HERE and complete a Demolition Permit Application.*

_____ If pool permit needed, STOP HERE and complete a Pool Permit Application.*

*also Sign page 4 of this application.

7. 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. ft.

Electrical work requires third party inspection. The costs are not included in this permit fee.

**** all commercial construction requires a set of stamped prints for architect/engineer licensed in NYS.**

***** construction of a residence 1500 sq. ft. or greater requires a set of stamped prints from NYS architect/engineer.**

8. ESTIMATED COST OF PROJECT: \$ _____

9. Using the PLOT diagram on page 4 of this application or on a copy of your survey:

- 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
- Location of septic system
- Location of well

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

Building Type	Sq.Ft.- Habitable Space	Sq.Ft – Non-Habitable 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 Conservation Code			

OTHER: _____

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 and that all work will be done in full compliance with the Building, Fire and Energy Conservation Construction Code of New York State.

Signature of Applicant / Contractor

Signature of Property Owner

PERMIT is:

_____ APPROVED

_____ DISAPPROVED - reason for disapproval _____

Code Enforcement Officer

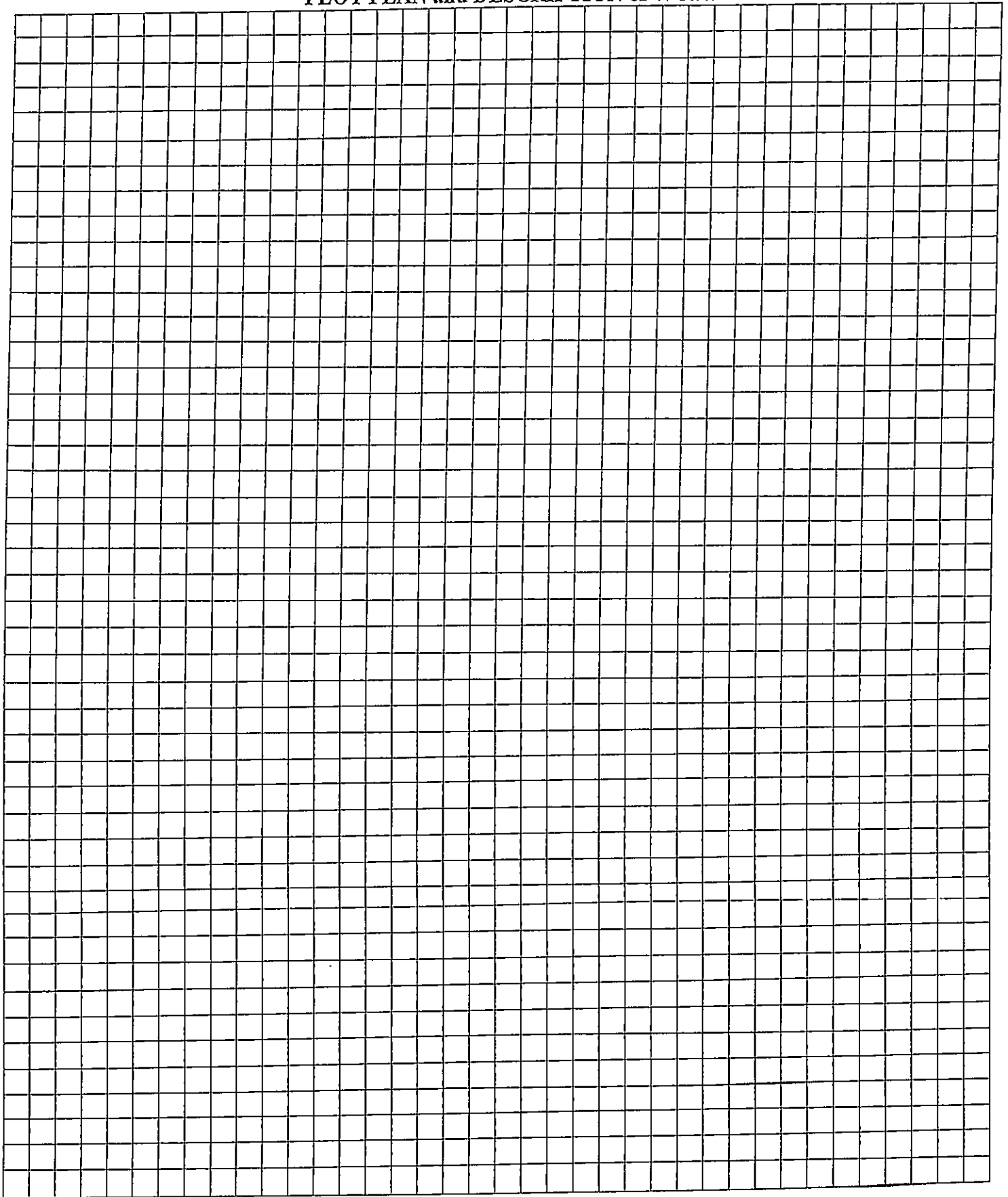
Date

Permit # Assigned _____

Permit Fee: _____

Fee Paid: _____

PLOT PLAN and DESCRIPTION of WORK



Reference North, show streets, property lines, existing buildings, proposed construction and additional details.