

Town of Macedon
32 Main Street
Macedon, NY 14502
Tel. (315) 986-5932 – Fax (315) 986-4172

Building Permit Application

REQUIREMENTS:

- A. Please complete entire application and submit to the Building Inspector for approval.
- B. Application is hereby made for a building permit in conformity with zoning ordinance of the Town of Macedon, the New York State Uniform Fire Prevention and Building Code and any amendments thereto.
- C. A complete set of accurately dimensioned building plans complete with the energy code and roof truss certifications stamped by an architect or licensed engineer shall accompany this application.
- D. No work shall commence before the building permit is issued. No building shall be occupied in whole or in part until the Building Department has issued a Certificate of Occupancy.
- E. Contractor must provide proof of Workers' Compensation/Liability insurance.

Date: _____ Zone: _____ Permit #: _____

Estimated Cost: _____ Tax ID #: _____ - _____ - _____

Property Owner: _____ Lot Size(acres): _____

Address: _____ Phone #: _____

Builder: _____ Phone #: _____

Address: _____

Location of Project: _____

GENERAL DESCRIPTION OF WORK/INTENDED USE: _____

PERMIT TYPE:

Residential: Single family _____ Duplex _____ Multi-family (3+units) _____ In-law _____

Commercial: _____ Industrial: _____ Other (describe): _____

NATURE OF WORK:

New construction _____ Addition _____ Remodel _____ Accessory structure _____

Change of use _____ Other (describe) _____

WORK SPECIFICATIONS:

Residential Primary Structure: Number of units _____ Width _____ Depth _____

Total height _____ No. of stories _____ Bedrooms _____ Bathrooms _____

Sq. ft. of living area _____ Sq. ft. garage _____

Renovation/alteration (describe work) _____

Will roof or floor trusses be used? Roof: Yes/No Floor: Yes/No (please circle)

Will attic/basement be finished or used as living space? Attic: Yes/No Bsmt: Yes/No

Residential Accessory Structure:

Pole Barn: Width _____ Depth _____ Height _____

Detached Garage: Width _____ Depth _____ Height _____

Shed: Width _____ Depth _____ Height _____

Fence: Height _____ Length _____ Type/Style _____

Deck: Overall Dimensions: _____ X _____ Sq. ft. _____

Pool: Above-ground _____ In-ground _____ Dimensions _____
Hot tub _____ Gallons _____

Woodstove/furnace/fireplace: _____ Other: _____

MANUFACTURED HOME INSTALLATION:

Park Name: _____ Lot No.: _____

Year of Unit: _____ Make/Model: _____

Length _____ Width _____ Bedrooms _____ Bathrooms _____

(Provide proposed lot layout with distances to adjacent units, plus letter of permission from park owner.)

COMMERCIAL/INDUSTRIAL:

Total square footage _____ Width _____ Length _____ Height _____

Construction type (circle one): 1A 1B 2A 2B 3A 3B 4A 4B 5A 5B

Sprinkler system proposed? Yes/No Will trusses be used? Roof: Yes/No Floor: Yes/No

Provide detailed breakdown of uses within the building:

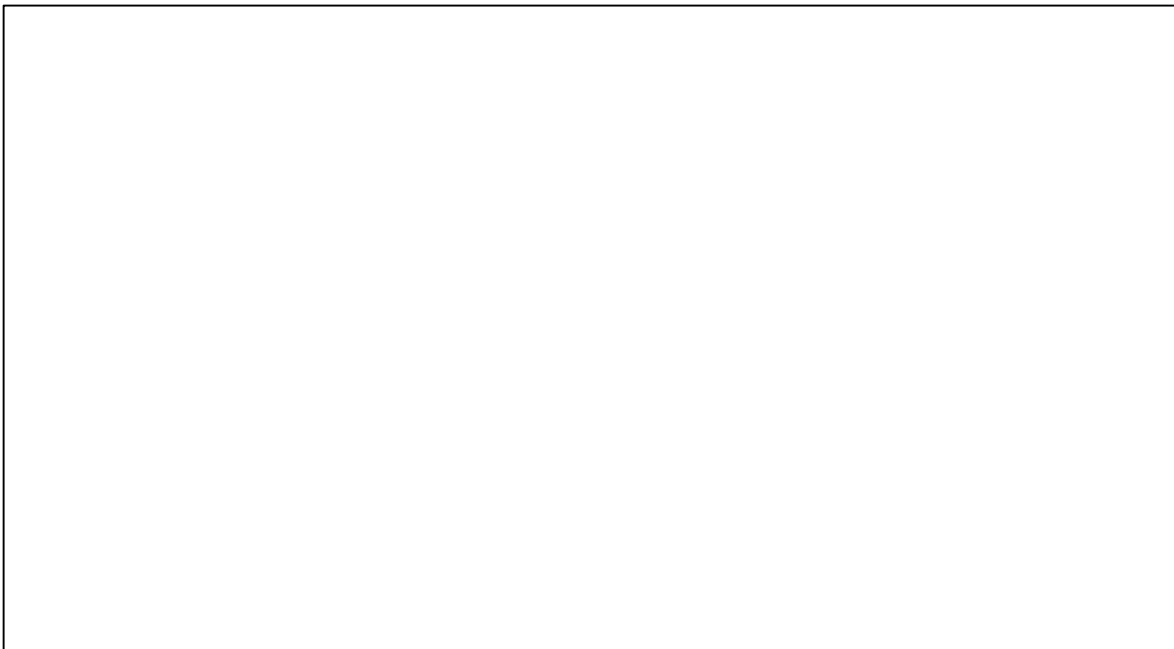
<u>Description of Use</u>	<u>NYS Bldg. Code Use Group</u>	<u>Square Footage</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

ADDITIONAL INFORMATION:

Special Use Permit Required/In Effect: No _____ Yes _____ Permit No. _____

Zoning Variance Required/Granted: No _____ Yes _____ Date Granted _____

Please draw a rough sketch of existing structures and property setbacks on all sides, or provide a separate plot plan.



The undersigned represents and agrees as a condition of this permit that the structure will be constructed in accordance with the zoning ordinance and all other applicable laws of the Town of Macedon, the New York State Uniform Fire Prevention and Building Code and the plans annexed hereto, and grants the Town of Macedon Building Department the right to make all required inspections.

THIS PERMIT SHALL EXPIRE 1 YEAR FROM THE DATE OF ISSUE.

AS PER RESOLUTION NO. 18 (92) DEVELOPER CHARGES THE TOWN BOARD RESOLVED THAT ANY ASSOCIATED CHARGES SHALL BE CHARGED BACK TO THE DEVELOPER.

SIGNATURE OWNER / BUILDER / APPLICANT

DATE

BUILDING/ZONING OFFICER

DATE

PERMIT FEES

PERMIT: _____

ESCROW: _____

RECREATION: _____

WATER: _____

SEWER: _____

OTHER: _____

TOTAL: _____