

# TOWN OF AVON, NEW YORK

PERMIT # \_\_\_\_\_  
 PAID: \_\_\_\_\_  
 RECEIPT # \_\_\_\_\_

## APPLICATION FOR PLAN EXAMINATION AND BUILDING PERMIT

**IMPORTANT — Applicant to complete all items in sections: I, II, III, IV, and VIII.**

**I. LOCATION OF BUILDING**

AT (LOCATION) \_\_\_\_\_ (NO.) \_\_\_\_\_ (STREET) \_\_\_\_\_ ZONING DISTRICT \_\_\_\_\_

\_\_\_\_\_ AND \_\_\_\_\_

(CROSS STREET) (CROSS STREET)

SUBDIVISION \_\_\_\_\_ LOT \_\_\_\_\_ LOT SIZE \_\_\_\_\_

**II. TYPE AND COST OF BUILDING — All applicants complete Parts A — D**

<p><b>A. TYPE OF IMPROVEMENT</b></p> <p>1 <input type="checkbox"/> New building</p> <p>2 <input type="checkbox"/> Addition (If residential, enter number of new housing units added, if any, in Part D, 13)</p> <p>3 <input type="checkbox"/> Alteration (See 2 above)</p> <p>4 <input type="checkbox"/> Repair, replacement</p> <p>5 <input type="checkbox"/> Wrecking (If multifamily residential, enter number of units in building in Part D, 13)</p> <p>6 <input type="checkbox"/> Moving (relocation)</p> <p>7 <input type="checkbox"/> Change of Occupancy</p>	<p><b>D. PROPOSED USE — For "Wrecking" most recent use</b></p> <table border="0"> <tr> <td style="vertical-align: top;"> <p><b>Residential</b></p> <p>12 <input type="checkbox"/> One family</p> <p>13 <input type="checkbox"/> Two or more family — Enter number of units — — — — —&gt; _____</p> <p>14 <input type="checkbox"/> Transient hotel, motel, or dormitory — Enter number of units — — — — —&gt; _____</p> <p>15 <input type="checkbox"/> Garage</p> <p>16 <input type="checkbox"/> Carport</p> <p>17 <input type="checkbox"/> Other — Specify _____</p> </td> <td style="vertical-align: top;"> <p><b>Nonresidential</b></p> <p>18 <input type="checkbox"/> Amusement, recreational</p> <p>19 <input type="checkbox"/> Church, other religious</p> <p>20 <input type="checkbox"/> Industrial</p> <p>21 <input type="checkbox"/> Parking garage</p> <p>22 <input type="checkbox"/> Service station, repair garage</p> <p>23 <input type="checkbox"/> Hospital, institutional</p> <p>24 <input type="checkbox"/> Office, bank, professional</p> <p>25 <input type="checkbox"/> Public utility</p> <p>26 <input type="checkbox"/> School, library, other educational</p> <p>27 <input type="checkbox"/> Stores, mercantile</p> <p>28 <input type="checkbox"/> Tanks, towers</p> <p>29 <input type="checkbox"/> Other — Specify _____</p> </td> </tr> </table>	<p><b>Residential</b></p> <p>12 <input type="checkbox"/> One family</p> <p>13 <input type="checkbox"/> Two or more family — Enter number of units — — — — —&gt; _____</p> <p>14 <input type="checkbox"/> Transient hotel, motel, or dormitory — Enter number of units — — — — —&gt; _____</p> <p>15 <input type="checkbox"/> Garage</p> <p>16 <input type="checkbox"/> Carport</p> <p>17 <input type="checkbox"/> Other — Specify _____</p>	<p><b>Nonresidential</b></p> <p>18 <input type="checkbox"/> Amusement, recreational</p> <p>19 <input type="checkbox"/> Church, other religious</p> <p>20 <input type="checkbox"/> Industrial</p> <p>21 <input type="checkbox"/> Parking garage</p> <p>22 <input type="checkbox"/> Service station, repair garage</p> <p>23 <input type="checkbox"/> Hospital, institutional</p> <p>24 <input type="checkbox"/> Office, bank, professional</p> <p>25 <input type="checkbox"/> Public utility</p> <p>26 <input type="checkbox"/> School, library, other educational</p> <p>27 <input type="checkbox"/> Stores, mercantile</p> <p>28 <input type="checkbox"/> Tanks, towers</p> <p>29 <input type="checkbox"/> Other — Specify _____</p>
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<p><b>B. OWNERSHIP</b></p> <p>8 <input type="checkbox"/> Private (individual, corporation, nonprofit institution, etc.)</p> <p>9 <input type="checkbox"/> Public (Federal, State, or local government)</p>			

<p><b>C. COST</b></p> <p>10. Cost of Improvement _____ \$</p> <p><i>To be installed but not included in the above cost</i></p> <p>a. Electrical _____</p> <p>b. Plumbing _____</p> <p>c. Heating, air conditioning _____</p> <p>d. Other (elevator, etc.) _____</p> <p>11 TOTAL COST OF IMPROVEMENT _____ \$</p>	<p>[Omit cents]</p>	<p>Nonresidential — Describe in detail proposed use of buildings, e.g., food processing plant, machine shop, laundry building at hospital, elementary school, secondary school, college, parochial school, parking garage for department store, rental office building, office building at industrial plant. If use of existing building is being changed, enter proposed use.</p>
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**III. SELECTED CHARACTERISTICS OF BUILDING — For new buildings and additions, complete Parts E — M; for wrecking, complete only Part E, for all others skip to IV.**

<p><b>E. PRINCIPAL TYPE OF FRAME</b></p> <p>30 <input type="checkbox"/> Masonry (wall bearing)</p> <p>31 <input type="checkbox"/> Wood frame</p> <p>32 <input type="checkbox"/> Structural steel</p> <p>33 <input type="checkbox"/> Reinforced concrete</p> <p>34 <input type="checkbox"/> Other — Specify _____</p>	<p><b>G. DIMENSIONS:</b></p> <p>40 Length _____ Width _____</p> <p>41 No. Stories _____</p>	<p><b>J. TOTAL SQ. FT. AREA</b></p> <p>48 Total Ground Floor Area of All Structures on Lot Including Proposed _____ SF</p> <p>49 Total Land Area Sq. Ft. _____ SF</p> <p>50 Percentage of Lot Coverage _____ %</p>	
	<p><b>H. SQUARE FT. AREA</b></p> <p>42 1st Floor _____ SF</p> <p>43 Each Additional Story _____ SF</p>		<p><b>K. NUMBER OF OFF-STREET PARKING SPACES</b></p> <p>51 Enclosed _____</p> <p>52 Outdoors _____</p>
<p><b>F. PRINCIPAL TYPE OF HEATING FUEL</b></p> <p>35 <input type="checkbox"/> Gas</p> <p>36 <input type="checkbox"/> Oil</p> <p>37 <input type="checkbox"/> Electricity</p> <p>38 <input type="checkbox"/> Coal</p> <p>39 <input type="checkbox"/> Other — Specify _____</p>	<p><b>I. TYPE OF MECHANICAL</b></p> <p>Will there be central air conditioning?</p> <p>44 <input type="checkbox"/> Yes      45 <input type="checkbox"/> No</p> <p>Will there be an elevator?</p> <p>46 <input type="checkbox"/> Yes      47 <input type="checkbox"/> No</p>		<p><b>L. RESIDENTIAL BUILDINGS ONLY</b></p> <p>53 Number of bedrooms _____</p> <p>54 Number of bathrooms</p> <p style="margin-left: 20px;">             { Full _____              Partial _____         </p>

NO STREET

III. M (Description of Repair or Alteration Work)


**NOTES AND DATA:**

**FEES:**

Per attached schedule.

**INSTRUCTIONS**

- a. This application must be accompanied by two complete sets of plans showing proposed construction and two complete sets of specifications. Plans and specifications shall describe the nature of the work to be performed, the materials and equipment to be used and installed and details of structural, mechanical, electrical and plumbing installations.
- b. **The work covered by this application may not be commenced before the issuance of Building Permit.**
- c. Upon approval of this application, the Building Department will issue a Building Permit to the applicant together with approved, duplicate set of plans and specifications. Such permit and approved plans and specifications shall be kept on the premises available for inspection throughout the progress of the work.
- d. No building shall be occupied or used in whole or part for any purpose whatever until a Certificate of Occupancy shall have been granted by the Building Department.
- e. All applicants must stake out property lines and proposed construction for the purpose of checking set backs before permit will be issued.
- f. **APPLICATION IS HEREBY MADE** to the Building Department for the issuance of a Building Permit pursuant to the New York State Building Construction Code for the construction of buildings, additions or alterations, or for removal or demolition, as herein described. The applicant agrees to comply with all applicable laws, ordinances and regulations.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
(Address of applicant)

**IV. IDENTIFICATION — To be completed by all applicants**

Name	Mailing address — Number, street, city, and State	ZIP code	Tel. No
1. Owner or Lessee			
2. Contractor			
3. Architect or Engineer			

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of this jurisdiction.

Signature of applicant	Address	Application date
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**DO NOT WRITE BELOW THIS LINE**

**V. ADDITIONAL PERMITS REQUIRED OR OTHER JURISDICTION APPROVALS**

Permit or Approval	Check	Date Obtained	Number	By	Permit or Approval	Check	Date Obtained	Number	By
WATER TAP					SPECIAL USE PERMIT				
PLANNING BOARD REVIEW									
VARIANCE					E-911 ADDRESS APPROVAL				
COUNTY DRIVEWAY PERMIT					OTHER				

**VI. VALIDATION**

Building Permit number \_\_\_\_\_  
 Building Permit issued \_\_\_\_\_ 19\_\_\_\_  
 Building Permit Fee \$ \_\_\_\_\_  
 Planning Board Fees \$ \_\_\_\_\_  
 ZBA Fees \$ \_\_\_\_\_  
 Disapproved \_\_\_\_\_

FOR DEPARTMENT USE ONLY

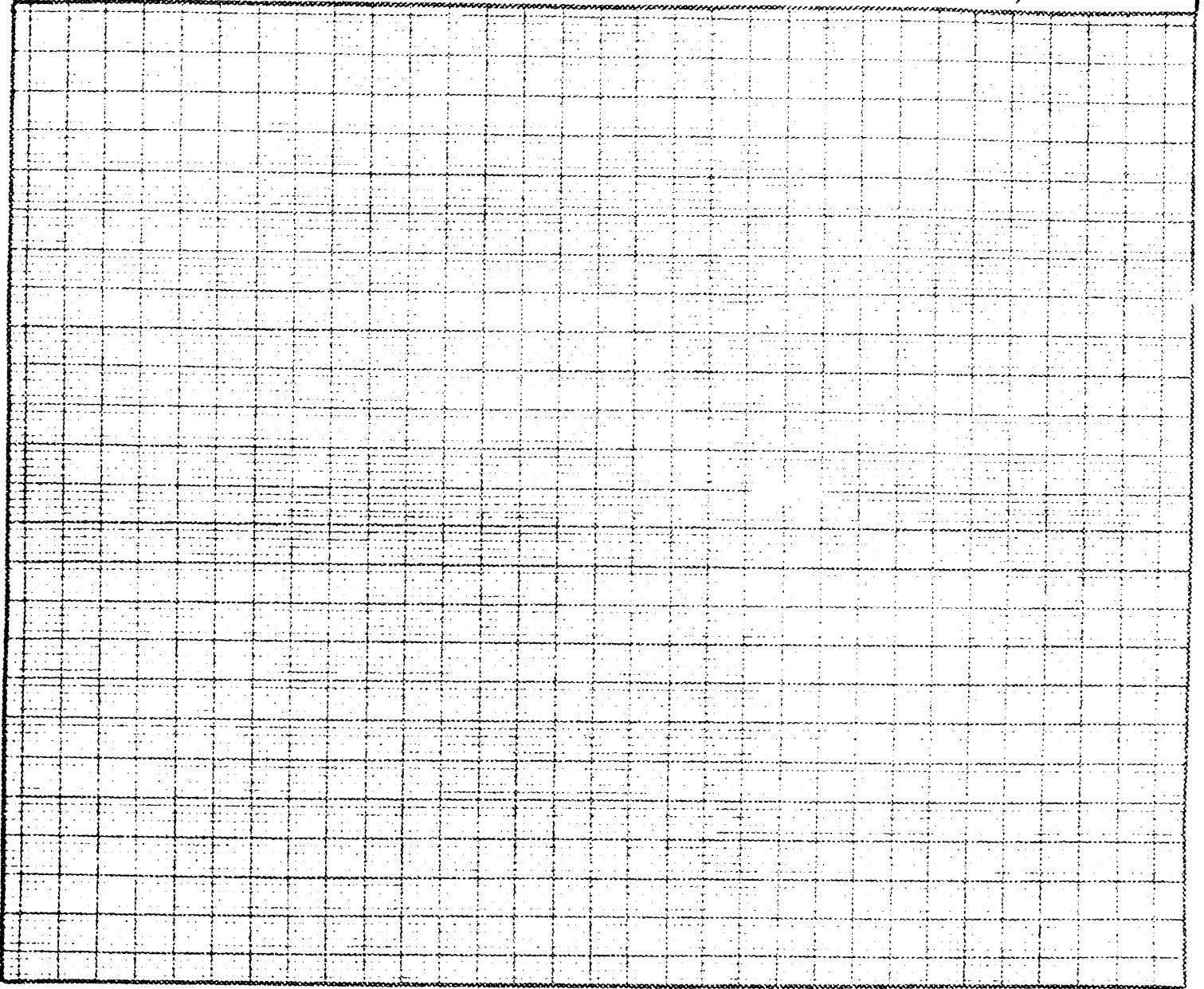
Septic Approval \_\_\_\_\_  
 Electrical Cert \_\_\_\_\_  
 Potable Water Test \_\_\_\_\_  
 Water Meter Installed \_\_\_\_\_

Approved by: \_\_\_\_\_  
 \_\_\_\_\_  
 Building Inspector

**VII. ZONING PLAN EXAMINERS NOTES**

DISTRICT
USE
FRONT YARD
SIDE YARD
REAR YARD
NOTES

**VIII. SITE OR PLOT PLAN - For Applicant Use (Must be completed for New Construction and Additions)**



Locate clearly and distinctly all buildings, whether existing or proposed, and indicate all yard dimensions from property lines. Give identifying information or deed description, show street names and adjacent property owner names. Indicate whether an interior or a corner lot.

**Contact the Town Code Enforcement Office at 226-2425 Ext. 19 a minimum of THREE (3) days PRIOR to the date for all inspections.**

**TYPE OF INSPECTION:** (Check appropriate type of inspection (s) below. all inspections need to be scheduled with a 3 day advance notice.)

- |  |  |
|--|--|
| <input type="checkbox"/> Footing before pouring concrete _____ | <input type="checkbox"/> Plumbing before enclosing _____ |
| <input type="checkbox"/> Foundation before backfill _____      | <input type="checkbox"/> Septic system and well _____    |
| <input type="checkbox"/> Framing before enclosing _____        | <input type="checkbox"/> HVAC _____                      |
| <input type="checkbox"/> Electrical before enclosing _____     | <input type="checkbox"/> Progress _____                  |
| <input type="checkbox"/> Insulation before enclosing _____     | <input type="checkbox"/> Final Completion _____          |