

CHAUTAUQUA COUNTY, NEW YORK

TOWN OF ELLERY

APPLICATION FOR BUILDING AND ZONING PERMIT

Applicant _____ Fee Paid _____
Address _____ Permit # _____
_____ Date _____

Phone _____ Signed _____

Application Date _____ Application # _____

Approved _____ Disapproved _____

Zoning: Variance Required ? _____ Special Use Permit? _____
Site Plan Review _____ Date _____
Zoning Board Approval/ Disapproval _____ Date _____
Other Board Approval/ Disapproval _____ Date _____

**Inspections Required for Certificate of Occupancy
(signed by inspector)**

Foundation _____	Date _____
Framing _____	Date _____
Plumbing _____	Date _____
Electrical _____	Date _____
Well/Septic _____	Date _____
Site Plan Inspection _____	Date _____
Final _____	Date _____

Health Department Review Required? _____
Date Completed _____

Certificate of Occupancy # _____ Date _____
Certificate of Compliance # _____ Date _____

Name _____ Address _____ Permit No. _____
Approved _____ Disapproved _____ Date Issued _____
Permit for _____
Location _____ Section _____ Block _____ Lot _____

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APPLICATION FOR BUILDING AND ZONING PERMIT

Note- No permit for new construction will be issued unless this application is properly filled out. At least two sets of plans, specifications, and a plot plan (see page four) must be submitted with this application.

INSTRUCTIONS

- 1. This application is to be filled out by typing or printing and must be submitted to the Building and Zoning Officers of the Town of Ellery.
2. The work covered by this application shall not be commenced before issuance of a Building Permit by the Building and Zoning Officers.
3. Upon approval of this application, a Building Permit will be issued to the applicant by the Building and Zoning Officers. The Building Permit shall be posted upon the premises in a conspicuous place so as to be visible from the street throughout the period of construction.
4. No structure or use for which a Building Permit has been issued shall be occupied or used in whole or in part upon completion for any purpose until a Certificate of Occupancy shall have been granted by the Building Code Enforcement Officer.

Owner (if different from applicant)

Name _____

Contractor _____

Address _____

Address _____

Phone _____

Phone _____

Certificates Received? ___ General Liability ___ Workers' Compensation ___ Disability

Insurance Company Name _____ # _____

(Last two types not required for sole proprietorships or partnerships without employees)

Architect/Engineer Stamp Required? _____ Name _____

Electrician _____

Plumber _____

AFFIDAVIT

STATE OF NEW YORK

SS:

CHAUTAUQUA COUNTY

I swear that to the best of knowledge and belief the statements contained in this application, together with the plans and specifications submitted, are a true and complete statement of all proposed work to be done on the described premises and that all provisions of the Building Codes and Zoning Codes and all other laws pertaining to the proposed work shall be complied with, whether specified or not, and that such work is authorized by the owner. I acknowledge that zoning code information relating to applicant's district has been received.

Signature of Owner _____

Date _____

(Architect, Contractor, Owner,)

Construction Information

New Construction _____ Addition _____ Alteration _____

Other (please explain) _____

Location _____
(Street number and name)

Tax Map: Section _____ Block _____ Lot _____

Size of Lot ___x___x___x___ Zoning District _____

Cost of Project _____ Size (Square Feet) _____ # of Families _____

Date Work to Start _____ Date of Completion (Approximate) _____

Building Type _____

Intended Use _____

Foundation Type _____ Roof Material _____

Exterior Walls _____ Interior Walls _____

Heating Facilities _____ Chimney Construction _____

Water Source: Well ___ Municipal ___ Engineer's Stamp: ___ Fee Paid _____

Sewage Disposal: Public ___ Private ___ Perc ___ Fee Paid _____

Driveway Required? ___ Date ___ Highway Sup. _____

Parking Lot Permit _____ Sign _____ Flood Plain _____

If Mobile/Double-wide, HUD _____ NYS _____
Model Number _____ Serial Number _____ Year _____

State Permits Required?

SEQRA _____ Wetlands _____ Stormwater Management _____

Right-of-way Permit _____ Easement _____ UFPO # _____

UFPO - IT'S THE LAW!
CALL BEFORE YOU DIG
1-800-962-7962

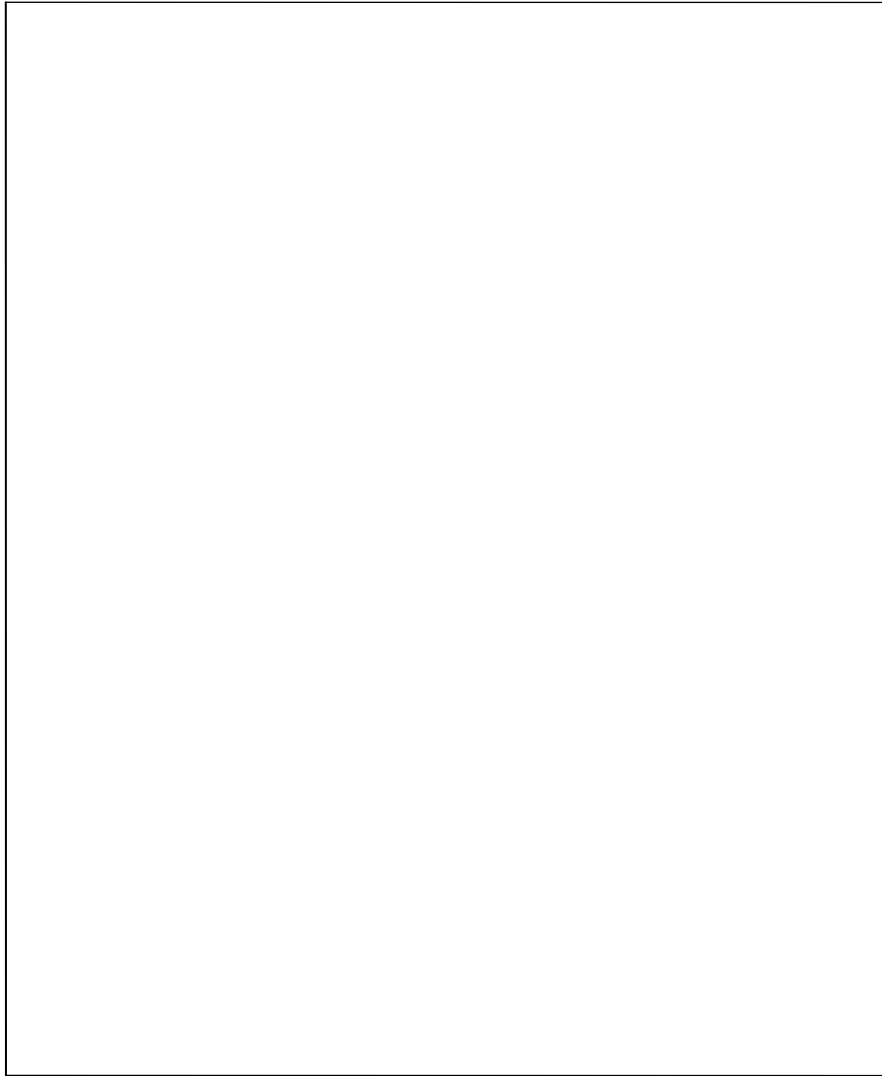
PLOT PLAN

1. This page shall be used for the drawing of a plot plan for all major construction and additions and in such other cases as the Building and Zoning Officer deems necessary.
2. The plot plan shall show the location and size of the lot, locations and sizes of buildings and structures upon the premises (both existing and proposed) and their relationship to adjoining premises and public streets.
3. Locate and label clearly and distinctly all buildings and structures, show widths and depths of all yards, show names of all streets and indicate north with an arrow.
4. Distance from building to street line: _____ feet. Distance to nearest building at rear: _____ feet and on each side: _____ feet. Distance from building to rear lot line: _____ feet. Distance from building to each side lot line: _____ feet.

SHOW DISTANCE FROM BUILDING TO SIDE, FRONT AND REAR LOT LINES

Rear of Lot _____ ft.

Left side depth of lot _____ ft.



Right side depth of lot _____ ft.

Frontage of lot _____ ft.

Street name _____