

# Village of Philmont

PO Box 822 Philmont, NY 12565

## Application for Building/Use Permit

### Answer all of the following

Tax map# \_\_\_\_\_ Zoning District \_\_\_\_\_

Property Location \_\_\_\_\_

### Owner information

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone # \_\_\_\_\_

### Contractor information

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone # \_\_\_\_\_

Electrician \_\_\_\_\_

Mason \_\_\_\_\_

Plumber \_\_\_\_\_

Existing use and occupancy \_\_\_\_\_

Proposed use and occupancy \_\_\_\_\_

### Nature of proposed work

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> New Bldg.           | <input type="checkbox"/> Addition to Bldg. | <input type="checkbox"/> _____ # of dwelling units |
| <input type="checkbox"/> Alteration to Bldg. | <input type="checkbox"/> Demolition        | <input type="checkbox"/> Residential               |
| <input type="checkbox"/> Change of Occupancy | <input type="checkbox"/> Pool              | <input type="checkbox"/> Business/Industrial       |
| <input type="checkbox"/> Sign/Fence          | <input type="checkbox"/> _____             | <input type="checkbox"/> _____                     |

### Occupancy

### Will this proposal

Involve new or alterations to electrical wiring?  Yes  No

Involve new or alterations to, or additional use of, a sewage disposal system?  Yes  No

Require installation or change in location of a driveway?  Yes  No

Involve a change in use or occupancy?  Yes  No

**Size of Building** \_\_\_\_\_ Stories \_\_\_\_\_ Depth \_\_\_\_\_ Width \_\_\_\_\_ Height \_\_\_\_\_

**Lot Dimensions** \_\_\_\_\_ Width \_\_\_\_\_ Depth \_\_\_\_\_

**Estimated cost** \$ \_\_\_\_\_

**Additional description** \_\_\_\_\_

*APPLICATION IS HEREBY MADE to the Building Department for the issuance of a Building Permit pursuant to the New York State Uniform Fire Prevention and Building 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, including Federal, State and Village of Philmont.*

### **Signature of**

**Applicant** \_\_\_\_\_ **Printed Name** \_\_\_\_\_

Date: \_\_\_\_\_

**Building Department use:**

The application is:  approved  denied

Reason for denial of permit:

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Referral to Zoning Board \_\_\_\_\_

Referral to Planning Board \_\_\_\_\_

Date \_\_\_\_\_

CEO Signature \_\_\_\_\_

Zoning Board/ Planning Board Approval required:  yes  no \_\_\_\_\_ date approved

Approval documents submitted:  yes  no

Final approval special conditions \_\_\_\_\_

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Attachments provided by applicant:

Construction Plans

Plot plan

Sign details

Deed

Contractors Ins.

Proof of Insurance

CCDOH approval

Driveway permit

Asbestos survey

Homeowner Ins. Exemption