



# TOWN OF PORTER

3265 Creek Road ♦ Youngstown, New York 14174 ♦ (716)745-3730, ext. 7 ♦ fax(716) 745-9022 ♦

Code Enforcement office ♦ [p.jeffery@townofporter.net](mailto:p.jeffery@townofporter.net) ♦ mobile(716) 280-8009

## BUILDING PERMIT APPLICATION

An incomplete Application may delay the timely issuance of your Permit; please enter "n/a" if a section is not applicable.

### BUILDING PERMIT REQUIREMENT CHECKLIST:

- Construction documents:** Plans, sections, details, and specifications for all new work and or alterations; significant work (at the discretion of the Code Enforcement Officer) requires:
  - Documents shall be sealed/certified by a professional unless waived by the Code Enforcement Officer – as per NYS regulations (write out exclusions required by law).
  - "RES-check" documents – sealed/certified by professional
  - Code review checklist – sealed/certified by professional. "2015 IRC for one and or two-family dwelling plan review record"
- Site plan:** (plot/plat plan) which locates all structures (both existing and proposed) on a parcel. The site plan shall be a certified (professional) for significant new work. Sketch type Site plan may be used for minor projects (at the discretion of the Code Enforcement Officer) unless specifically designated in Federal, State, or local laws.
- Grading plan:** As per separate document "**Site/Grading Plan Requirements.**" A grading plan for all significant new work shall be at the discretion of the Code Enforcement Officer.
  - Engineering Cost Recovery deposit:** Grading plan reviews require.
- Two (2) sets of above required drawings/ documents shall be submitted;** Construction documents which are accepted as part of the application for a building permit shall be marked as accepted by the Code Enforcement Officer in writing or by stamp. One set of the accepted construction documents shall be retained by the Code Enforcement Officer, and one set of the accepted construction documents shall be returned to the applicant to be kept at the work site so as to be available for use by the Code Enforcement personnel. However, the return of a set of accepted construction documents to the applicant shall not be construed as authorization to commence work, nor as an indication that a building permit will be issued. Work shall not be commenced until and unless a building permit is issued.
- Electronic Construction Documents:** drawing file (PDF format) emailed to [p.jeffery@townofporter.net](mailto:p.jeffery@townofporter.net) or on other approved media.
- Proof of insurance:** (Worker compensation, liability, and disability). Workers comp. & disability insurance document must be submitted on one of the following forms: (refer to [www.wcb.ny.gov](http://www.wcb.ny.gov))
  - Liability insurance can be submitted on an "Accord" form.
  - Form C-105.2, U-26.3,
  - CE-200 – Exempt forms for property owners contact your insurance agent/carrier for help. Property owners who are completing the work themselves and not sub-contracting work out can submit, as per NYS worker comp. board requirements the CE-200 – Exempt forms for property owners. (refer to [www.wcb.ny.gov](http://www.wcb.ny.gov))
- Septic system design documents:** required for New occupied Structures and Additions to Occupied structures; provide system drawings with;  Approval from Niagara County Health Department
- Soil bearing/compression test:** certified by licensed professional
  - Required for significant new work; shall be at the discretion of the Code Enforcement Officer.

### INSPECTION REQUIREMENTS:

Work shall remain **accessible and exposed** until inspected and accepted by the Code Enforcement Officer. The permit holder shall notify the Code Enforcement Officer when any element of work described herein is ready for inspection.

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| <ul style="list-style-type: none"> <li><input type="checkbox"/> <b>Work site</b> prior to the issuance of a building permit</li> <li><input type="checkbox"/> <b>Footing and foundation</b></li> <li><input type="checkbox"/> Preparation for <b>concrete slab</b></li> <li><input type="checkbox"/> Rough <b>framing</b></li> <li><input type="checkbox"/> Rough <b>plumbing, electrical, &amp; HVAC</b></li> <li><input type="checkbox"/> <b>Building systems</b>, including any underground components.</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> <b>Fire-resistant construction</b> and or penetrations (i.e.: double layers of Gypsum board with overlapped joints)</li> <li><input type="checkbox"/> Solid-fuel-burning <b>heating appliances, chimneys, flues, or gas vents</b></li> <li><input type="checkbox"/> <b>Insulation</b> - Energy Code compliance</li> <li><input type="checkbox"/> <b>Final</b> – Certificate of Occupancy -final inspection after all work authorized by the building permit has been completed.</li> </ul> |
|---|--|

I agree to inspection requirements (initials of Applicant): \_\_\_\_\_ date: \_\_\_\_\_

# BUILDING PERMIT REQUIRED INFORMATION:

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Date of Application: \_\_\_\_\_

## 1.) Project Location:

- a. Number & Street Address: \_\_\_\_\_
- b. Tax Map Number (SBL): \_\_\_\_\_
- c. Current Use/Occupancy of Property/Building: \_\_\_\_\_
- d. Proposed Use/Occupancy of Property/Building: \_\_\_\_\_

## 2.) Owner Contact Information:

- a. Owner Name: \_\_\_\_\_
- b. Address: \_\_\_\_\_
- c. City, State, Zip code: \_\_\_\_\_
- d. Phone Number: \_\_\_\_\_
- e. Email: \_\_\_\_\_

## 3.) Description of Project: ( size: \_\_\_ ft. x \_\_\_ ft. x \_\_\_ ht.-ft.) or ( \_\_\_\_\_ square feet); \_\_\_ # of stories tall

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 3.) **Permit type:**  Above Ground Pool  Agricultural Structure  Alteration/Remodel  
 Apartment Building  Commercial Structure (*new*)  Commercial Structure Alteration/Addition  
 Deck  Demolition  Fence  Fire Safety Inspection  Fireworks display  
 Flood Plain Development  Garage/Pole Barn/Carport/Addition to these  
 Greenhouse (Nonagricultural)/Sunroom  In-ground Pool  Kennel  Miscellaneous  
 Other: \_\_\_\_\_  Pavilion/Pergola/Gazebo  
 Pond; Farm  Pond; Recreational  Porch/Ramp/Shed  Re-Roof  Sign  
 Single Family Dwelling  Solar Energy System  Temporary Use  Two Family Dwelling  
 Wind Energy Conversion System(*non-commercial*)  Wind Energy Conversion System(*commercial*)

## 4.) Type of Improvement:

- Proposed Use/Occupancy type is:  Family Room  Living Room  Kitchen  Den/Office  
 Bedroom  Bathroom  Other: \_\_\_\_\_
- Conversion of current Use/Occupancy:  
Existing Use/Occupancy: \_\_\_\_\_  
Proposed/New Use/Occupancy is: \_\_\_\_\_

## 6.) Estimated Project Cost:

- a. Contractor(s) estimate for the work to be performed \$ \_\_\_\_\_
- b. Homeowners estimate for work performed by homeowner (*other than above*) \$ \_\_\_\_\_

### BELOW LINE – IS FOR OFFICE USE ONLY

Date received: \_\_\_\_\_ Received by: \_\_\_\_\_ Forwarded to: \_\_\_\_\_

#### Special approval needed by:

- Zoning Board of Appeals  Planning Board  Other: \_\_\_\_\_  None

#### Proof of Insurance:

- WC; C105.2 or U26.3  Disability  General Liability  CE200 Exemption Certificate

**Verifications - Zoning District:**  RA  LDR  WR  MDR  CMU  RC  M1  M2  M3

Flood Hazard Area  NYSDEC Wetland  Federal Wetland  By: \_\_\_\_\_

# BUILDING PERMIT REQUIRED INFORMATION:

1.) **Architect/Engineer:**

- a. Name: \_\_\_\_\_
- b. Address: \_\_\_\_\_
- c. City, State, Zip code: \_\_\_\_\_
- d. Phone Number: \_\_\_\_\_
- e. Email: \_\_\_\_\_

2.) **General Contractor:**

- a. Name: \_\_\_\_\_
- b. Address: \_\_\_\_\_
- c. City, State, Zip code: \_\_\_\_\_
- d. Phone Number: \_\_\_\_\_
- e. Email: \_\_\_\_\_

3.) **Electrical Contractor:**

- a. Name: \_\_\_\_\_
- b. Phone Number: \_\_\_\_\_
- c. Email: \_\_\_\_\_

4.) **Plumbing Contractor:**

- a. Name: \_\_\_\_\_
- b. Phone Number: \_\_\_\_\_
- c. Email: \_\_\_\_\_

5.) **Mechanical Contractor:**

- a. Name: \_\_\_\_\_
- b. Phone Number: \_\_\_\_\_
- c. Email: \_\_\_\_\_

6.) \_\_\_\_\_ (other) **Contractor:**

- a. Name: \_\_\_\_\_
- b. Phone Number: \_\_\_\_\_
- c. Email: \_\_\_\_\_

**OWNER IS DOING THE WORK, NO CONTRACTORS USED** – *Workers Compensation Exemption Certificate is Required*

### Part 3: Project Location and Details

**PLEASE ATTACH A COPY OF A - SITE PLAN!!!** - A sketch of the work to be performed must be made a part of this application. The sketch must include the following:

- Location of the proposed structure(s) or Addition showing the number of stories and all exterior dimensions.
- The distance of the proposed structure(s) from all lot lines.
- The distance of the proposed structure(s) from existing structure including neighboring structures.
- The depth of the proposed foundation/footing(s) below finished grade.
- Building coverage Area; Max. allowed \_\_\_\_\_%; Actual/Proposed \_\_\_\_\_% (The maximum percentage of the lot to be covered by building(s)).
- Foundation/Basement:
  - Full Basement  Partial Basement  Crawl Space  Pier(s)Foundation  Slab Foundation
- Garage/Pole Barn/Carport:
  - Attached  Detached  Connected Utilities:  Electric  Gas  Other: \_\_\_\_\_
- Deck/Porch/Ramp:  Open  Covered/Roof  Enclosed  Screened  Other: \_\_\_\_\_
- Shed;  Located in Rear Yard  Less than 10 feet Height  Less than 144 square feet

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## IMPORTANT NOTICES: READ BEFORE SIGNING.

- 1.) Work conducted pursuant to a Building Permit must be visually inspected by the Code Enforcement Officer and must conform to New York State Uniform Fire Prevention and Building Code, the Code of the Town of Porter, and all other applicable codes, rules or regulations.
- 2.) It is the **Applicant's responsibility** to contact the Code Enforcement Officer at 716.745.3730 *ext. 7* or at *mobile number* -716.280.8009 (mon. thru Thursday 8 am to 4 pm and Friday 8 am to 1 pm) at least 48 hours before the owner wishes to have an inspection conducted. More than one inspection may be necessary. This is especially true for "internal work" which will eventually be covered from visual inspection by additional work (i.e.: Plumbing work later to be covered by a wall). **DO NOT PROCEED TO THE NEXT PHASE OF CONSTRUCTION IF SUCH "INTERNAL WORK" HAS NOT BEEN INSPECTED.** Otherwise, work may need to be removed at the owner's or contractor's expense to conduct the interior inspection. Close coordination with the Code Enforcement Officer will greatly reduce this possibility.
- 3.) *APPLICANT HEREBY AGREES TO ALLOW THE CODE ENFORCEMENT OFFICER TO INSPECT THE SUFFICIENCY OF THE WORK BEING DONE PURSUANT TO THIS PERMIT, PROVIDED HOWEVER, THAT SUCH INSPECTION(S) ARE LIMITED TO THE WORK BEING CONDUCTED PURSUANT TO THIS PERMIT AND ANY OTHER NON WORK-RELATED VIOLATIONS WHICH ARE READILY DISCERNABLE FROM SUCH INSPECTION(S).*
- 4.) New York State law requires contractors to maintain Worker's Compensation and Disability Insurance for their employee's. No Permit will be issued unless currently valid Worker's Compensation and Disability Insurance certificates are attached to this application or are on file with this Office. If the contractor believes he/she is exempt from the requirements to provide Worker's Compensation and or Disability Benefits, the Contractor must complete form CE-200; An Exemption Certificate must be obtained at; Use this link (online) for directions - [http://www.wcb.ny.gov/content/ebiz/wc\\_db\\_exemptions/How-to-Obtain-Certificate-of-Exemption.pdf](http://www.wcb.ny.gov/content/ebiz/wc_db_exemptions/How-to-Obtain-Certificate-of-Exemption.pdf) . The Link refers to "Business Express;" even as a Homeowner – follow the Guide document for the Certificate. Registering/Login is required to get a Certificate. An Exemption Certificate must be provided/attached prior to a Building permit being Issued, if you are not Providing proof of WC/DB insurance.
- 5.) If a Certificate of Occupancy is required, the Structure shall not be occupied until said Certificate has been issued.
- 6.) Work undertaken pursuant to this permit is conditioned upon and subject to any State and Federal regulations relating to asbestos material.
- 7.) This permit does not include any privilege of encroachment in, over, under, or upon any State, County, and or Town Street of Right-of-way.
- 8.) The Building Permit (Red) card must be displayed so as to be visible from the street nearest to the site of the work being conducted.

I, \_\_\_\_\_ (printed), the above-named applicant, hereby attest that I am the lawful Owner of the property described herein or am the lawful Agent of said owner and affirm under the penalty of perjury that all statements made by me on this application are true.

(Signature) \_\_\_\_\_ Date: \_\_\_\_\_

Code Enforcement Officer Signature:

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