

Town of Hermon, NY

Application Number \_\_\_\_\_

## Application for Building Permit

Date Received \_\_\_\_\_

Date Approved/Disapproved \_\_\_\_\_

Complete and mail to: Code Enforcement Officer, PO 28, Hermon NY 13652 or drop off at Town Clerk's office. For more info or questions call **Michael McQuade** at 315-347-3606 or email **hermoncodes@gmail.com**

Tax Map Id # \_\_\_\_\_

APPLICATION IS HEREBY MADE for the issuance of a Building Permit pursuant to the New York Uniform Fire Prevention and Building Code for the construction of buildings, addition or alterations, or for removal or demolition as here in described, located at \_\_\_\_\_

The applicant agrees to comply with all applicable laws, ordinances and regulations.

\_\_\_\_\_  
(name of applicant)

\_\_\_\_\_  
(name of owner)

\_\_\_\_\_  
(address of applicant)

\_\_\_\_\_  
(address of owner)

\_\_\_\_\_  
(phone # of applicant)

\_\_\_\_\_  
(phone # of owner)

1. State Existing use and occupancy of premise and intended use and/or occupancy of proposed construction.
  - a. Existing use and occupancy: \_\_\_\_\_
  - b. Intended use and occupancy: \_\_\_\_\_
2. Nature of work (ck one or more): New Building \_\_\_\_\_, Addition \_\_\_\_\_, Alteration \_\_\_\_\_, Repair \_\_\_\_\_, Removal \_\_\_\_\_, Demolition \_\_\_\_\_, Sign \_\_\_\_\_, Other \_\_\_\_\_
3. Estimated cost\* \_\_\_\_\_ Building Permit Fee \_\_\_\_\_
4. If dwelling unit, number of units: \_\_\_\_\_; Number of dwelling units on each floor: \_\_\_\_\_; If garage number of cars \_\_\_\_\_
5. If business, commercial or mixed occupancy, specify nature and extent of each type of use: \_\_\_\_\_
6. Dimensions of entire new construction: Front \_\_\_\_\_; Rear \_\_\_\_\_; Depth \_\_\_\_\_; Height \_\_\_\_\_; # of stories \_\_\_\_\_
7. Size of lot: Front \_\_\_\_\_; Rear \_\_\_\_\_; Depth \_\_\_\_\_
8. Name of compensation Insurance Carrier \_\_\_\_\_  
Number of Policy \_\_\_\_\_; Date of Expiration \_\_\_\_\_
9. Name of Architect: \_\_\_\_\_ address: \_\_\_\_\_ Phone # \_\_\_\_\_
10. Name of Contractor: \_\_\_\_\_ address: \_\_\_\_\_ Phone # \_\_\_\_\_
11. Will electrical work be inspected by, and a Certificate of Approval obtained from the NY Board of Fire Underwriters or other agency or organization? \_\_\_\_\_. If so, specify \_\_\_\_\_

\* Costs for the work described in the Application for Building Permit includes the cost of all of the construction and other work done in connection therewith, exclusive of the cost of the land. If final cost exceeds estimated cost, an additional fee may be required before issuance of Certificate of Occupancy.

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Provide the following information as appropriate

1. Attach a site plan locating property lines, driveway, location of existing buildings, proposed site of new building, septic system, well.
2. Foundation type: \_\_\_\_\_
3. Depth of foundation: \_\_\_\_\_
4. Attach Floor Plan drawn to scale: indicate emergency windows in bedrooms; wall lengths; total square footage; location of windows, doors (size of doors); plumbing appliances, heating system.
5. Attach drawing of floor construction or describe floor structure and materials.
6. Attach drawing of wall structure or describe wall structure and materials:
7. Attach drawing of roof structure or describe roof structure and materials:
8. Insulation R-values for floor: \_\_\_\_\_
9. Insulation R-values for walls: \_\_\_\_\_
10. Insulation R-values for attic: \_\_\_\_\_
11. Attach drawing of septic system or describe system and materials, include results of perk test.
12. Location of smoke and carbon monoxide detectors: \_\_\_\_\_
13. Attach drawing or description of additional plans such as: electrical plan; plumbing plan.

# Affidavit of Exemption to Show Specific Proof of Workers' Compensation Insurance Coverage for a 1, 2, 3 or 4 Family, Owner-occupied Residence

**\*\*This form cannot be used to waive the workers' compensation rights or obligations of any party.\*\***

Under penalty of perjury, I certify that I am the owner of the 1, 2, 3 or 4 family, owner-occupied residence (including condominiums) listed on the building permit that I am applying for, and I am not required to show specific proof of workers' compensation insurance coverage for such residence because (please check the appropriate box):

I am performing all the work for which the building permit was issued.

I am not hiring, paying or compensating in any way, the individual(s) that is(are)

performing all the work for which the building permit was issued or helping me perform such work.

I have a homeowner's insurance policy that is currently in effect and covers the property listed on the attached building permit AND am hiring or paying individuals a total of less than 40 hours per week (aggregate hours for all paid individuals on the jobsite) for which the building permit was issued.

I also agree to either:

\* acquire appropriate workers' compensation coverage and provide appropriate proof of that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit if I need to hire or pay individuals a total of 40 hours or more per week (aggregate hours for all paid individuals on the jobsite) for work indicated on the building permit, or if appropriate, file a WC/DB-100 exemption form; OR

\* have the general contractor, performing the work on the 1, 2, 3 or 4 family, owner-occupied residence (including condominiums) listed on the building permit that I am applying for, provide appropriate proof of workers' compensation coverage or proof of exemption from that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit if the project takes a total of 40 hours or more per week (aggregate hours for all paid individuals on the jobsite) for work indicated on the building permit.

\_\_\_\_\_  
(Signature of Homeowner)

\_\_\_\_\_  
(Homeowner's Name Printed)

\_\_\_\_\_  
(Date Signed)

Sworn to before this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Property Address that requires the building permit:  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Town Clerk or Notary Public

Home Telephone Number \_\_\_\_\_

Town of Hermon

Building Permit Fees

\$0.00	-	\$ 4,999.99	-----	\$ 25.00
\$ 5,000	-	\$ 9,999.99	-----	\$ 35.00
\$ 10,000	-	\$ 14,999.99	-----	\$ 50.00
\$ 15,000		\$ 24,999.99	-----	\$ 75.00
\$ 25,000	-	\$ 49,999.99	-----	\$ 100.00

> \$ 50,000.00 is \$ 150.00 plus \$ 3.00 per \$1,000 over \$50,000.00

Agricultural farm buildings not to exceed \$ 25.00