

TOWN of _____
APPLICATION FOR BUILDING AND ZONING PERMIT
APPLICANT NAME _____

MAILING ADDRESS _____

PHONE _____

TAX SECTION _____ HOUSE # _____

STREET NAME _____

APPLICATION DATE _____

Note: No permit for new construction will be issued unless this application is properly filled out. One set of plans, specifications, and a plot plan must be submitted with this application.

INSTRUCTIONS

1. This application is to be filled out by typing or printing and must be submitted with proper fee to the Building Officer of the Town of East Otto.
2. The work covered by this application shall not be commenced before issuance of a Building Permit by the Building Officer.
3. Upon approval of this application, a Building Permit will be issued to the applicant by the Building Officer. 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 Officer.
5. The cost of construction is the cost of materials plus the cost of labor regardless of who is doing the work.
6. A statement of plan for the Cattaraugus County Health Department must accompany this application if septic is to be installed.
7. If a zoning permit is necessary, it should be part of your application.
8. Several inspections are required and are listed in the permit.
9. All work must comply with the New York State Building Code Rules & Regulations.
10. Due to the time necessary for review, a permit may not be issued immediately, but within a reasonable amount of time.
11. Any deviation of work from the approved plans must be approved by the building inspector. Additional work beyond the plans will require a new permit and fee.
12. The affidavit must be completed and must be signed in the presence of a notary.
13. Permit will expire 12 months after date of issuance.
14. Submission of proof for workman's compensation must be submitted by your contractor before a permit can be issued. Please see attached copy of required proof.
15. After completing this form return with fee payment to:

Jeff Holler
Town of East Otto CEO
8346 Swamp Road
Cattaraugus, NY 14719
(716)307-3069 Cell
(716)257-9622 Fax
eastottoceo@gmail.com

CONSTRUCTION INFORMATION

All construction information must be completed. Please indicate N/A on any line that is not applicable to your project.

NEW CONSTRUCTION _____ ADDITION _____
ALTERATION _____
DEMOLITION _____ OTHER (please explain) _____

LOCATION (Street Number and Name)

FEET FROM LOT LINES: FRONT _____ SIDE _____
SIDE _____ REAR _____

COST OF PROJECT _____
SIZE (Square Feet) _____ # OF FAMILIES _____

DATE WORK TO START _____ DATE OF
COMPLETION (Approximate) _____

BUILDING TYPE _____ INTENDED USE _____
OF BATHROOMS _____ # OF BEDROOMS _____

FOUNDATION TYPE _____ ROOF MATERIAL _____
EXTERIOR WALLS _____ INTERIOR WALLS _____

HEATING FACILITIES _____ CHIMNEY CONSTRUCTION _____
WATER SOURCE: _____

SEWAGE DISPOSAL: _____

Does the applicant agree to meet the requirements of the Cattaraugus County Health
Department Sanitary Code and the NYS Plumbing Code _____

DRIVEWAY REQUIRED _____ DATE _____ HIGHWAY SUPT. _____
PARKING LOT PERMIT _____ SIGN _____ FLOOD PLAIN _____

IF MOBILE HOME: HUD _____ NYS _____

MODEL NUMBER _____ SERIAL NUMBER _____ YEAR _____
MAKE _____ INSTALLER ID: _____

SOLID FUEL BURNING APPLIANCE:

MAKE AND MODEL NUMBER: _____

MATERIAL UNDER APPLIANCE: _____

MATERIAL ON WALL BEHIND APPLIANCE: _____

MANUFACTURERS RECOMMENDED DISTANCE FROM NEAREST WALL _____

FLUE SIZE _____

**IT'S THE LAW
CALL UFPO 2
WORKING DAYS
BEFORE YOU DIG
1-800-962-7962
OR 811**

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 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. A detailed duplicate set of plans must accompany the application. *NEW RESIDENCE'S REQUIRE NEW YORK STATE ARCHITECT STAMPED PLANS.*

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

Rear of Lot _____ft.



Frontage of Lot _____ft.

STREET NAME _____

APPLICANT SIGNATURE _____ Date: _____

Applicant being duly sworn, says that he/she is the owner or authorized agent for which the foregoing work is proposed to be done, and that he is duly authorized to perform such work and that all workers employed on this building are covered by contract or compensation insurance, and that all work will be performed in accordance with all existing state and local laws.

**TOWN OF EAST OTTO
EAST OTTO, NY**

TAKE NOTICE

No building shall be occupied or used in whole or part for any purpose whatsoever until a Certificate of Occupancy shall have been granted by the Code Enforcement Officer of the Town of East Otto.

TAKE NOTICE

It is a violation of the Zoning Ordinance of the Town of East Otto to proceed with any building operations before this petition is approved and a written permit has been procured, therefore any violation is punishable as such.

TAKE NOTICE

IN ORDER TO OBTAIN A PERMIT, THE FOLLOWING IS REQUIRED:

1. SURVEY AND PLOT PLAN
2. TWO SETS OF CONSTRUCTION PLANS SHOWING
 - A. FLOOR PLANS
 - B. TYPICAL SECTIONS
3. AN APPROVED SEPTIC DESIGN FROM THE CATTARAUGUS COUNTY HEALTH DEPT.
4. CONTRACTORS MUST SUBMIT PROOF OF LIABILITY AND WORKMAN'S COMPENSATION INSURANCE.
5. ALL NEW RESIDENCE'S REQUIRE NEW YORK STATE ARCHITECT STAMPED PLANS.
6. SPECIAL USES REQUIRE PLANNING BOARD APPROVAL BEFORE A PERMIT IS ISSUED. NOTE: A PERMIT:MUST BE OBTAINED FROM THE HIGHWAY DEPT. BEFORE A DRIVEWAY CULVERT IS INSTALLED.

NOTE: PLANS IN COMPLIANCE WITH THE STATE BUILDING CODE MUST BE SUBMITTED WITH APPLICATION FOR REVIEW BY THE BUILDING INSPECTOR. NO PERSON SHALL MAKE ANY CHANGE IN PLANS HEREWITH SUBMITTED FOR SPECIFICATIONS HEREIN CONTAINED, OR IN THE STRUCTURAL PART OF THE BUILDING WITHOUT THE WRITTEN CONSENT OF THE BUILDING INSPECTOR.

I SWEAR (OR AFFIRM) THAT I AM THE OWNER/AUTHORIZED AGENT OF THE PREMISES MENTIONED IN THE FOLLOWING APPLICATION, AND SHOWN ON THE FOLLOWING APPLICATION AND PLANS, AND THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE STATEMENTS CONTAINED IN THIS APPLICATION INCLUDING THE ACCOMPANYING PLANS, DRAWINGS AND STATEMENTS (IF ANY)ARE TRUE. FOR AND IN CONSIDERTION OF THE GRANTING OF THE PERMIT HEREBY PETITIONED FOR, THE APPLICANT DOES AGREE TO EXERCISE SUCH PERMISSION IN STRICT ACCORDANCE WITH TERMS OF SAID PERMIT, THE TOWN OF ORDINANCES INCLUDING THE ZONING ORDINANCE, THE RULES AND REGULATIONS OF THE HEALTH DEPT., THE REGULATIONS OF THE NEW YORK STATE BUILDING CODE, AND ANY OTHER AGENCIES HAVING JURISDICTION.

SIGNATURE OF APPLICANT: _____ DATE: _____

EAST OTTO TOWN PERMIT FEES

Single & Two Family Dwelling

Up to 1000 sq. ft. \$105.00

each additional 1,000 sq. ft. or portion thereof \$55.00

Multiple Dwellings:

Three or more units \$105.00 per unit

Commercial or industrial-new and/or additions

Minimum 1,000 sq. ft. \$105.00

each additional 250 sq. ft. or portion thereof \$25.00

Accessory Structures (detached garages, storage barns, agricultural buildings, sugar cabins, etc.)

Up to 140 sq. ft N/C

141 to 500 sq. ft. \$30.00

501 to 1,000 sq. ft. \$55.00

Each additional 250 sq. ft. or part thereof \$15.00

Additions (Structures added to an existing structure, excludes, Commercial or industrial)

Up to 25 sq. ft. N/C

26 to 400 sq. ft. \$40.00

401 to 1,000 sq. ft. \$80.00

Each additional 250 sq. ft. or part thereof \$20.00

Miscellaneous

Chimneys and/or Stoves \$25.00

Swimming Pools non electric N/C

Swimming pools with electrical filtration system \$25.00

Fence-Wooden & Chain link \$30.00

Agricultural & Temporary Fences N/C

Decks \$30.00

Other \$25.00

General Misc.

RV Permits-30 Day \$10.00

Recreational Vehicles of Property Owner, if used Annual Permit \$25.00

Approved Recreational Campground-Annual \$105.00

Sign-Permanent \$15.00

FOR OFFICE USE ONLY:

FEE PAID _____ PERMIT # _____

DATE _____ SIGNED _____

FOR BUILDING AND ZONING OFFICER USE ONLY:

Certificates Received _____

General Liability _____

Worker's Compensation _____

Disability _____

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

Architect/Engineer Stamp _____ Name _____

Electrician _____ Plumber _____

INSPECTIONS REQUIRED FOR CERTIFICATE OF OCCUPANCY

SITE PLAN REVIEW _____ DATE _____

FOUNDATION _____ DATE _____

FRAMING _____ DATE _____

PLUMBING _____ DATE _____

ELECTRICAL _____ DATE _____

WELL/SEPTIC _____ DATE _____

FINAL _____ DATE _____

HEALTH DEPARTMENT REVIEW REQUIRED? _____

DATE COMPLETED _____

CERTIFICATE OF OCCUPANCY # _____

PERMIT APPROVED: _____

PERMIT DISAPPROVED: _____

REASON FOR DISAPPROVAL: _____

SIGNATURE: _____ CODE ENFORCEMENT OFFICER

FORWARD TO PLANNING BOARD ON: _____

FORWARD TO ZONING BOARD ON: _____

VARIANCE REQUIRED _____

SPECIAL USE PERMIT _____

PLANNING APPROVAL/DISAPPROVAL _____ DATE _____

SIGNATURE: _____ PLANNING BOARD CHAIR

OTHER BOARD APPROVAL/DISAPPROVAL _____ DATE _____

SIGNATURE: _____ BOARD CHAIR