



Town of Harpersfield

25399 State Route 23
Harpersfield, NY 13786

Delaware County

(607)652-5060

Email: tohclerk@gmail.com

www.townofharpersfield.com

APPLICATION FOR LAND USE PERMIT

DATE: _____

PERMIT #: _____

FEE PAID: _____

CHRISTOPHER PLANTE, CODE ENFORCEMENT OFFICER,

(607)437-5816

EMAIL : tohceo1@gmail.com

APPLICANT : _____

ADDRESS: _____

TELEPHONE NUMBER: _____

EMAIL : _____

OWNER : _____

ADDRESS : _____

TELEPHONE NUMBER: _____

LOCATION & TAX MAP NO. FOR WHICH PERMIT IS FILED : _____

LIST OF ALL CONTRACTORS WHO WILL PERFORM WORK AT THE PROJECT SITE. IF MORE THEN (2) CONTRACTORS, USE BACK OF PAGE.

(1) CONTRACTOR : _____

TYPE OF WORK _____

ADDRESS : _____

TELEPHONE NUMBER : _____

(2) CONTRACTOR: _____

PROVIDE FOR THE ENFORCEMENT OF THIS LAW. THE APPLICANT MUST CERTIFY ON THE PLOT PLAN THAT ANY CONSTRUCTION AND STRUCTURES PURSUANT TO THE PERMIT WILL BE WITH THE APPROVAL OF THE OWNER OF RECORD.

IN ADDITION – BUILDING OVER 1,500 SQUARE FEET IN FLOOR SPACE OR OVER \$ 10,000.00 IN COST SHALL REQUIRE THE SEAL OF NEW YORK STATE LICENSED ARCHITECT OR ENGINEER UPON THE PLANS SUBMITTED.

NO PERMIT WILL BE ISSUED UNTIL ALL NECESSARY PERMIT APPROVALS FROM ANY OTHER AGENCIES HAVE BEEN SUBMITTED.

STATE OF NEW YORK }
COUNTY OF DELAWARE } SS
TOWN OF HARPERSFIELD }

DEPONENT 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 ALL WORKK WILL BE PERFORMED IN ACCORDANCE WITH ALL EXISTING STATE LAWS AND LOCAL ORDINANCES.

SWORN TO THIS DAY _____, 20____

TOWN CLERK

APPLICANTS SIGNATURE

TYPE OF WORK: _____

ADDRESS : _____

TELEPHONE NUMBER : _____

STATE THE INTENDED USE OF THIS BUILDING PERMIT: _____

APPLICATION FOR :

CONSTRUCTION, ERECTION OR LOCATION OF ANY NEW BUILDING OR STRUCTURE

ALTERATION OR ADDITION IN ANY WAY THAT WOULD ALTER THE EXTERIOR DIMENSIONS OF AN EXISTING BUILDING OR STRUCTURE

THE ESTABLISHMENT OF A NEW OR REPLACEMENT WATER SUPPLY, SANITARY SEWAGE DISPOSAL OR UTILITY SYSTEM

THIS PLOT OF LAND IS LOCATED WITHIN A FLOOD ZONE

THIS PLOT OF LAND IS LOCATED WITHIN A SUBDIVISION

TOTAL COST OF CONSTRUCTION : _____

WORK COVERED UNDER THIS BUILDING PERMIT APPLICATION CAN BE STARTED BEFORE THE ISSUANCE OF THE BUILDING PERMIT.

THIS APPLICATION WILL NOT BE CONSIDERED UNLESS ACCOMPANIED BY THE FOLLOWING:

- A. ONE (1) COPY OF A WORKING DRAWING, DRAWN TO SCALE SHOWING ALL STRUCTURAL DETAILS OF THE PROPOSED BUILDING; SUCH AS FOOTING & FOUNDATION SIZE AND TYPE; STRUCTURAL FRAMING MEMBERS, SIZE AND TYPE, ECT.

- B. ONE (1) COPY OF A PLOT PLAN DRAWN TO SCALE SHOWING ACTUAL DIMENSIONS OF THE LOT TO BE BUILT UPON; THE LOCATION AND DIMENSION OF ANY ACCESS DRIVE AND ANY PROPOSED STRUCTURE; THE PROPERTY BOOUNDRIES AND THE NAME OF OWNER OF RECORD; LOCATION AND TYPE OF WATER SUPPLY AND SEWAGE DISPOSAL FACILITIES AS WELL AS DISTANCE FROM MAIL STRUCTURE, AND SUCH OTHER INFORMATION AS MAY BE NECESSARY TO MAKE A DETERMINATION UNDER THE NEW YORK STATE SANITARY CODE REGULATIONS AND

MANDATORY INSPECTIONS
STATE BUILDING CONSTRUCTION CODE

INSPECTIONS WILL BE MADE AS THE WORK PROGRESSES. NOTICE SHALL BE MADE TO THE CODES ENFORCEMENT OFFICER FOR THE INSPECTIONS AT THE FOLLOWING STAGES OF WORK:

1. WHEN EXCAVATION IS COMPLETE AND FOOTING FORMS ARE IN PLACE (BEFORE POURING).
2. AFTER FOOTINGS ARE POURED, FOUNDATION WALLS ARE POURED OR LAID, DRAIN TILE IS IN PLACE (BEFORE BACKFILL).
3. WHEN THE STRUCTURE IS ENCLOSED (OUTSIDE ONLY AND WINDOWS ECT.)
4. ALL SEPTIC SYSTEMS MUST MEET REQUIREMENTS SET BY THE NEW YORK STATE DEPARTMENT OF HEALTH HANDBOOK. SEPTIC SYSTEMS MUST BE INSPECTED BEFORE BEING BACKFILLED.
5. ELECTRICAL: AS REQUIRED BY NEW YORK BOARD OF FIRE UNDERWRITERS.
6. FINAL: WHEN THE BUILDING IS COMPLETED. THIS INSPECTION WILL BE MADE UPON APPLICATION FOR A CERTIFICATE OF OCCUPANCY, WHICH YOU MUST HAVE BEFORE YOU MOVE IN.

THE UNDERSIGNED ACKNOWLEDGES THAT THEY HAVE RECEIVED THE MANDATORY INSPECTIONS LIST FOR THE TOWN OF HARPERSFIELD.

SIGNATURE: _____

PRINT NAME: _____

DATE: _____

SIGNATURE OF CODE ENFORCEMENT OFFICER: _____

DATE: _____