

Section _____ Block _____ Lot _____

**TOWN OF GOSHEN
BUILDING & ZONING DEPARTMENT
APPLICATION FOR BUILDING PERMIT**

Date Received _____

Date Approved _____

Reviewed by _____
(Name / Title)

INSTRUCTIONS:

- a. This application **must be completed in full** and submitted to the Building & Zoning Department.
- b. Plot plan-showing location of lot and of buildings on premises, relationship to adjoining premises or public streets or areas, and giving a detailed description of layout of property must be drawn on the diagram, which is part of this application.
- c. **This application must be accompanied by two complete sets of plans showing proposed construction and two complete sets of specifications.** Plans and specifications shall describe the nature of the work to be performed, the materials and equipment to be used and installed and details of structural, mechanical, electrical and plumbing installations.
- d. The work covered by this application may not be commenced before the issuance of Building Permit.
- e. Upon approval of this application, the Building Department will issue a Building Permit to the applicant together with approved set of plans and specifications. Such permit, approved plans and specifications shall be kept on the premises available for inspection throughout the progress of the work.
- f. No building shall be occupied or used in whole or in part for any purposes whatever until an application is made for and a Certificate of Occupancy shall have been granted by the Building Department.

APPLICATION IS HEREBY MADE to the Building Department for the issuance of a Building Permit pursuant to the New York State Building Construction Code for the construction of buildings, additions or alterations, or for removal of demolition, as herein described. The applicant agrees to comply with all applicable laws, ordinances and regulations.

(Name of Applicant)

(Name of owner of premises)

Street

Street

Town / City State Zip

Town / City State Zip

Phone #

Phone #

E-mail Address

E-mail Address

State whether applicant is owner, lessee, agent, architect, engineer or builder: _____

If owner or applicant is corporation, give names and titles of two officers and signature of duly authorized officer:

(Name & title of corporate officer)

(Name & title of corporate officer)

1. Location of land on which proposed work will be done (Street / Address) _____

2. State existing use and occupancy of premises and intended use and occupancy of proposed construction.
 - a. Existing use and occupancy _____
 - b. Intended use and occupancy _____

3. Nature of work (check all applicable):

New Building	Addition	Alteration	Repair
Removal	Demolition	Swimming Pool	Sign
Deck	Shed	Garage	Conversion
Wetlands	Other (list) _____		

4. Estimated Cost * _____ Fee _____

(* COSTS for the work described in the application for Building Permit should include the cost of all the construction & other work done in connection therewith, exclusive of the cost of the land. If the final cost exceeds the estimated cost, an additional fee may be required before the issuance of Certificate of Occupancy, or Certificate of Compliance)

5. If dwelling, number or dwelling unit _____ Number of dwelling units on each floor _____
 Number of bedrooms in each unit _____ If garage, number of cars _____.

6. Type of business, commercial or mixed occupancy, specify the nature and extent of each type of use:

7. Dimensions of same structure with alterations of additions, Front _____ Rear _____ Depth _____ Height _____

8. Dimensions of entire new Construction:
 Front _____ Rear _____ Depth _____ Height _____ Number of stories _____

9. Size of lot: Front _____ Rear _____ Depth _____

10. Name of Architect/Engineer _____
 Address _____
 Phone # _____

11. Name of Contractor _____
 Address _____
 Phone # _____

12. Name of Insurance Carrier _____
 Policy number _____
 Date of Expiration _____

13. Electrical to inspected by, and a Certificate of Approval **must** be obtained from the New York Board of Fire Underwriters or other Agency or organization? Please specify _____

OFFICE USE ONLY:

1. Zone or use district in which premises is situated _____

2. Does proposed construction violate any zoning law / ordinance or regulations?

3. Does application need to be referred to the Planning Board, Zoning Board, Environmental review Board?

PLOT DIAGRAM

1. Locate clearly and distinctly all buildings, whether existing or proposed.
2. Indicate all setback dimensions from property lines.
3. Give lot and block numbers or description according to deed.
4. List street names and indicate whether interior or corner lot.
5. Documentation can be attached (Please just note below - "see attached")

STATE OF NEW YORK,

COUNTY OF _____ } SS:

(Name of individual signing application)

Being duly sworn and desposes and says that he / she is the applicant above named. He / she is
the _____
(Contractor, agent, corporation officer, owner etc.)

of said owner or owners, and is duly authorized to perform or have performed the said work and to make and file this application that all statements contained in this application are true to the best of my knowledge and belief, and that the work will be performed in the manner set forth in the application and in the plans and specifications filed therewith.

Sworn to before me

This _____ day of _____

(Signature of applicant)

Notary Public, _____ County

**NOTICE OF UTILIZATION OF TRUSS TYPE CONSTRUCTION,
PRE-ENGINEERED WOOD CONSTRUCTION AND/OR TIMBER
CONSTRUCTION IN RESIDENTIAL STRUCTURES**

(In accordance with Title 19 NYCRR PART 1265)

Town of Goshen, New York 10924

TO: *Town of Goshen*

OWNER OF PROPERTY: _____

SUBJECT PROPERTY (ADDRESS AND TAX MAP NUMBER):

PLEASE TAKE NOTICE THAT THE (CHECK ALL THAT APPLY):

- New Residential Structure
- Addition to Existing Residential Structure
- Rehabilitation to Existing Residential Structure

**TO BE CONSTRUCTED OR PERFORMED AT THE SUBJECT PROPERTY REFERENCE ABOVE WILL UTILIZE
(check each applicable line):**

- Truss Type Construction (TT)
- Pre-Engineered Wood Construction (PW)
- Timber Construction (TC)

IN THE FOLLOWING LOCATION(S) (CHECK APPLICABLE LINE):

- Floor Framing, Including Girders and Beams (F)
- Roof Framing (R)
- Floor Framing and Roof Framing (FR)

SIGNATURE: _____

DATE: _____

PRINT NAME: _____

CAPACITY (Check One): Owner Owner's Representative