

BUILDING PERMIT APPLICATION
TOWN OF ROSE
 5074 N. Main Street, P.O. Box 310
 N. Rose, New York 14516 • 315-587-4418

NEW
 RENEW
 AMEND

Permit # _____

① Name _____
 Property Location _____
 Tax # _____ - _____ - _____ Zoned: R.R. AG. G.B. H.G.B H.R. IND. L.C.
 Owner's Address _____
 Town _____ State _____ Zip _____ Phone _____

② Present Use: Residence Seasonal Agricultural Commercial Vacant Other
 ③ Buildings: House Mobile ____ yr. Cottage Garage Barn Shed Other _____
 ④ Interest: Owner Partner Tenant Pending Purchase Con. Contractor Other _____

⑤ Type Proposed Improvement: New Construction Addition Alteration Replacement Demolition Change of Use Other _____
 ⑥ Residence Seasonal Residence Mobile ____ yr. Modular Multi-Family ____ # Units Garage Barn Shed Deck Patio Pool Sign Heat Roof Cabin/Camp Septic Excavation Foundation Dock Boat House Break Wall Other _____

⑦ Proposed Improvement:
 Foundation: Post Concrete Masonry Other _____
 Frame: Masonry Concrete Brick Wood Steel Other _____
 Sewer: Conventional Alternate Public Other _____
 Distance from Well ____ Water ____ House ____ Other _____
 Water: Drilled Well Dug Well Cistern Public Other _____
 Plumbing: PVC Copper Other _____
 Heat: Air Water Central None Other _____
 Fuel: Oil Gas Elect. Solid Solar Other _____
 Electric: 120 220 440 Other _____
 Chimney: Masonry Triple Wall B Vent Other _____
 Bathrooms: Number of Existing Full ____ Existing 1/2 ____ New Full ____ New 1/2 ____
 Bedrooms: Number of Existing ____ New ____
 Parking: Number of Existing Outdoors ____ Existing Enclosed ____ New Out ____ New Enclosed ____
 Other _____

⑧ Site: Elevation ____ Above Road Grade ____ Level ____ Below ____
 Lot Size: Front ____ Rear ____ Side ____ Side ____ =
 Total Acres ____ Total Sq. Ft. of Property ____ Sq. Ft.

⑨ Building: Height of Building ____ ft. Size Proposed Building ____ ft. x ____ ft. = ____ Sq. Ft.
 # of Stories ____ Size Existing Building ____ ft. x ____ ft. = ____ Sq. Ft.
 Total Sq. Ft. of Building ____ Sq. Ft.

⑩ Set Backs: Front Yard ____ ft. Side Yard ____ ft. Existing Proposed
 Rear Yard ____ ft. Side Yard ____ ft. Existing Proposed

⑪ Contractor Name _____ ⑫ Total Project Cost \$ _____
 Address _____ ⑬ Anticipated Completion Date _____
 Telephone # _____
 Worker Comp. Yes No NA Disability Ins. Yes No NA

⑭ I affirm under penalty of perjury, that the statements made in this application are true, and that the work shall be performed in compliance with the Town of Rose Zoning Law, the New York State Uniform Building and Fire Prevention Code, the Town of Rose Building Law, and all other applicable Federal, State and local laws, ordinances, rules and regulations.
 Failure to comply with such laws, ordinances, rules, and regulations or inaccuracies in this application shall be adequate grounds for this permit being suspended or revoked. You shall notify this office of any change in plans.
 Inspections of footings, foundation, framing, electrical, plumbing, insulation, heating and venting are required. A certificate of occupancy or compliance is required for all work. Permit expires one year from date of issuance. Permission is hereby given to the Building Inspector to enter in or on said property for inspection purposes.

Date of Application _____ Signed: _____

OFFICE USE ONLY	Date Application Rejected _____	<input type="checkbox"/> No Action <input type="checkbox"/> Special Permit <input type="checkbox"/> Area Variance <input type="checkbox"/> Use Variance
	ZBA # _____	Date of ZBA Decision _____ ZBA Fee \$ _____
	ZBA Decision _____	Conditions: _____
	Notes:	Zoning \$ _____ Building \$ _____ Sq. Foot \$ _____ Fee \$ _____ Total \$ _____
	Issued By: _____	Date Issued _____