

Village of Ravena
Building Department
15 Mountain Rd.
Ravena, NY 12143
Phone: (518) 756-8201
Fax: (518) 756-8356
buildingdept@villageofravena.com



Joseph J. Burns Sante DeBacco
Building/Fire Inspector Asst. Building/Fire Inspector

Commercial Change of Occupancy Application Information

1. **Application:** must be completely filled out on the computer or in ink. All applicants must submit a copy of the deed to the parcel, complete with any deed restrictions.
2. **Plot Plan:** Locate clearly all buildings and indicate setback dimensions from property lines. Indicate whether an interior or a corner lot. Indicate any green areas and any blacktopped areas. Provisions for off-street parking and number of spaces should be indicated.
3. **Building Plans:** submit two (2) complete sets of plans for proposed construction, alterations or additions. Plans should describe the nature of the work to be performed and any major equipment to be installed. Include a copy of current floor plans and show all revisions for the intended use. Plans must show the following:
 - a. All doors (including exit doors) location, size, direction of swing
 - b. All rooms identified
 - c. All dimensions on plans
 - d. Corridor sizes
 - e. Distance to travel to an exit
 - f. Exit and Emergency Lights with battery backup
 - g. Handicap facilities (if required)
4. **Electrical Certificate:** All electrical work must be inspected and a certificate of approval obtained from an electrical inspector.
5. **Building and Sign Permits:** If the Change of Occupancy requires alterations or additions then an application for a Building Permit must be made separately. If the Change of Occupancy requires the placement of a sign, a Sign Permit must be obtained from the Building Department.

You may be required to submit proof of compliance with the regulations of various other agencies depending upon the nature of the proposed changes.

No building shall be occupied or used in whole or in part for any purpose whatsoever until and application is completed and a Certificate of Occupancy has been granted by the Building Inspector.



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For Building Department Use:

Tax Map #: _____

To Planning Board: _____

Approved Denied Date: _____

To ZBA: _____

Approved Denied Date: _____

CO Date: _____

Application for Commercial Change of Occupancy

Location of Property: _____

Zoning District: _____ Current Occupancy Classification: _____

Owner's Name _____
 Address _____

 Phone _____ Cell _____

(if different than owner:)
 Applicant's Name _____
 Address _____

 Phone _____ Cell _____
 State applicants position, i.e. lessee, agent,
 architect or other _____

1. State existing use and occupancy of premises: _____

2. Will intended use replace or be in conjunction with existing use? _____
 Explain: _____

3. If dwelling, indicate total units _____ Number of Units per floor _____
4. If business, commercial, or mixed occupancy, specify nature and extent of each use:

5. Dimensions of existing structures: Front _____ Rear _____ Depth _____
 Height _____ Number of Stories _____
6. Size of lot: Front _____ Rear _____ Depth _____
7. Number of off street parking spaces to be provided: _____

Application is hereby made to the Building Inspector for the issuance of a Certificate of Occupancy for use of the property described herein. Applicant agrees to comply with all applicable State, County, and local laws, ordinances and regulations. No building shall be occupied or used in whole or in part for any purpose whatsoever until an application is completed, and a Certificate of Occupancy has been granted by the Building Inspector.

STATE OF NEW YORK
COUNTY OF ALBANY

_____, being duly sworn, deposes and says that he/she is the applicant above named. He/She is the (agent) (corporate officer) (contractor) of said owners and is duly authorized to make and file this application; that all statements contained in this application are true to the best of his/her knowledge and belief and that occupancy will be as set forth in this application.

SWORN this _____ day of _____

Signature of Owner, Applicant or Agent

Notary Public

Corporations Only:

If applicant, owner or operator is a corporation, give names and titles of two officers and signatures of duly authorized officer of each corporation:

Signature of Owner or Applicant

Date

Printed Name and Title of Owner or Applicant

Signature of Owner or Applicant

Date

Printed Name and Title of Owner or Applicant

Please submit the following:

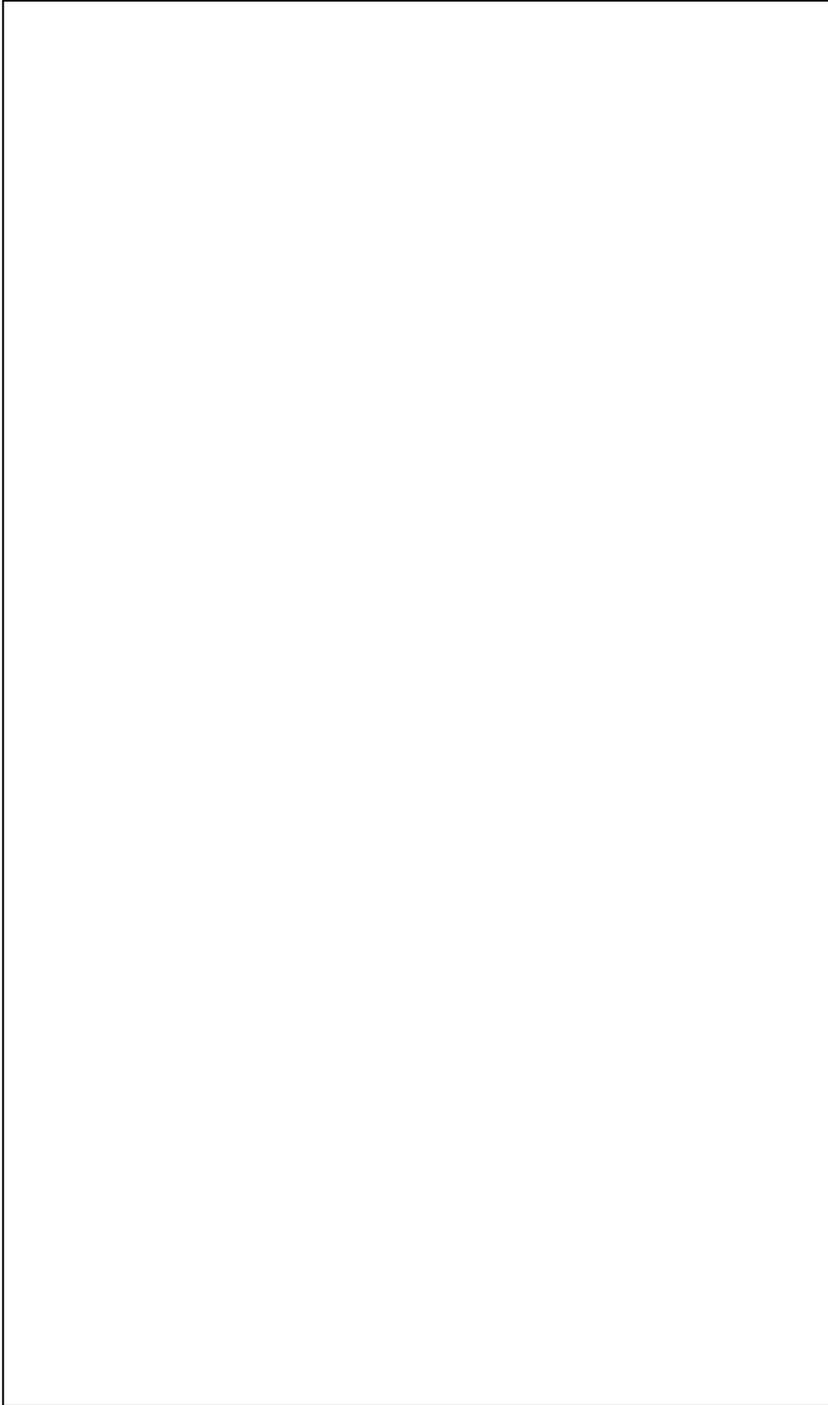
- Application
- Plot Plan
- Building Plans (2 Copies)

For Building Inspector use:	
This application is hereby <input type="checkbox"/> approved <input type="checkbox"/> disapproved and permission <input type="checkbox"/> granted <input type="checkbox"/> refused for the commercial Change of Occupancy requested. Reason for refusal: _____	

_____	_____
Date	Building Inspector

Plot Diagram

Locate clearly and distinctly all buildings whether existing or proposed, and indicate all set back dimensions from property line. Give lot and block numbers or description according to deed, and show all easements and street names and indicate whether interior or corner lot, or supply an approved plot plan showing all the above requirements.



Size of Lot:
Front _____
Rear _____
Depth _____

Note:
For Vacant lots print in dimensions of new building.
If there is an existing building and a proposed addition print in dimensions and show addition.

Signature

Date

For Building Inspector Use Only:

Building Department Review:

Building Inspector Signature

Date