APPLICATION FOR A BUILDING PERMIT SEPTIC

WHAT YOU WILL NEED TO SUBMIT FOR THIS PERMIT (Check List):
This completed building permit application signed by the owner (no permit application will be accepted unless it is completely filled out). INCOMPLETE APPLICATIONS WILL BE RETURNED.
Application fee. No permit application will be reviewed without the required fee.
WORKER'S COMPENSATION INSURANCE - PROOF OF INSURANCE OR AN EXEMPTION - OR A HOMEOWNER'S ATTESTATION OR EXEMPTION NO PERMIT WILL BE ISSUED WITHOUT IT. http://www.wcb.ny.gov/content/ebiz/wc_db_exemptions/requestExemptionOverview.jsp
☐ Site plan (to scale), and clear complete drawings of the work proposed.
An engineered septic design for new systems or a septic report for existing systems if additional bedrooms are added.
CALL 811 BEFORE YOU DIG – NO MATTER HOW BIG OR SMALL
DO NOT START CONSTRUCTION UNTIL YOU HAVE RECEIVED A PERMIT. AN APPLICATION IS NOT A PERMIT! A REVIEW OF YOUR APPLICATION MUST BE MADE TO DETERMINE COMPLIANCE WITH NEW YORK STATE LINEORM FIRE PREVETION AND BUILDING

CODES AND APPLICABLE ORDINANCES. ALLOW 14 BUSINESS DAYS FOR REVIEW.

YOU ARE RESPONSIBLE FOR ANY CHANGES THAT MUST BE MADE.

LATE FEES AND FINES MAY BE ASSESSED

YOUR PERMIT MUST BE POSTED SO THAT IT IS VISIBLE FROM THE ROAD.

(607) 561-2334

44 Grand Street, Sidney, New York 13838
FAX (607) 561-2335 email: sidneycodes@gmail.com

BUILDING PERMIT APPLICATION

FORM #1

TAX MAP NUMBER: #
1. DESCRIPTION OF PROJECT: (CHECK ONE) ☐ □RESIDENTIAL □COMMERCIAL □AGRICULTURAL NARRATIVE
2. APPLICANT'S NAME, ADDRESS, PHONE AND EMAIL NAME ADDRESS
HOME PHONE: () CELL: () EMAIL
\square Please send my permit by email rather than mail, I agree to print and post the permit.
3. OWNER'S NAME, ADDRESS, PHONE AND EMAIL IF SAME AS APPLICANT (Go to #4) NAME_ ADDRESS
4. CONTRACTOR'S NAME, ADDRESS, PHONE AND EMAIL LIST ADDITIONAL CONTRACTORS ON SUPLEMENT – FORM A-7 NAME
WORK PHONE: () CELL: () EMAIL Contractor has employees and/or wages are being paid for performance of work: Yes No
 (If "YES" provide proof of worker's compensation insurance. If "No" provide exemption certificate.) □ There is no contractor performing work. Owner or Family member(s) will be constructing the project. (Submit a homeowner's Workers' Compensation Exemption) □ I HAVE INCLUDED PROOF OF WORKER'S COMPENSATION OR AN EXEMPTION FORM.
NOTE: NO PERMIT WILL BE ISSUED WITHOUT PROOF OR EXEMPTION - THIS WILL DELAY YOUR PERMIT

5. Cost of construction or alteration: \$						
6.	Is the site located within a	flood plain?	☐ Yes ☐ No (IF YES - INCLUDE FORM A-6)			
	Is the site located within a	designated wetland?	□ Yes □ No			
7. REQUESTING A PERMIT FOR: (CHECK ALL THAT APPLY AND ATTACH RELATED FORMS WITH APPLICATION)						
Residential Dwelling: Built On-Site Modular Four + Multiple Dwelling Two-Family Three Family (Attach Form R-1) Manufactured Home (Attach Form R-2 to application) Alteration Repair Renovation (Attach hazardous materials acknowledgement supplement to application) Addition What is the addition?						
□ Cha	nge of Occupancy 🇨 What is the o	change?				
□ Accessory Structure: 🅶 🗆 Garage 🗆 Shed 🗅 Other:						
□ Agri	cultural Building used solely for fa	arm implements, hay, grain, poultr	y, livestock or horticultural products.			
=	-	⊒ Tank Replacement □ Repair/Up				
	J	I □ In Ground □ Hot Tub □S	ра			
☐ Elec	trical (Attach electrical supplemen	nt to application)				
☐ Sola	r Electrical (Attach electrical supplement	ent to application)				
☐ Plur	nbing (Attach plumbing attachment to a	pplication)				
	ting System or Appliance (Attach he					
□ Roo	f ☞ 🗆 Asphalt Shingle 🛚 Metal	☐ Other:				
		knowledgement supplement to application	1)			
□ Othe	er Construction:					
CONDITIONS FOR PERMIT:						
a.	submitted plans and specifications, NYS Uniform Fire Prevention and Building Code, the local laws of the Town of Sidney, and all other applicable codes, rules and regulations.					
 b. It is the permit holder's responsibility to contact the Code Enforcement Officer at least 48 hours prior to requiring an inspection. This is especially true for work that will not visible once it is covered. More than one inspection may be required. c. THE OWNER HEREBY AGREES TO ALLOW THE CODE ENFORCEMENT OFFICER OF THE TOWN OF SIDNEY OR HIS DESIGNEE ACCESS TO THE PROPERTY WHERE THE PROJECT IS LOCATED FOR THE PURPOSES OF INSPECTING THE SUFFICIENCY OF THE WORK PURSUANT TO THIS PERMIT, PROVIDED HOWEVER THAT SUCH INSPECTION(S) SHALL BE LIMITED TO THE WORK BEING CONDUCTED PURSUANT TO THIS PERMIT AND ANY OTHER NON- WORK-RELATED VIOLATIONS THAT ARE READILY DISCERNIBLE FROM SUCH INSPECTION(S). INSPECTIONS MAY BE UNANNOUNCED BUT WITHIN REASONABLE 						
d.	material, lead or mold. Disturbance, alteration or demolition of existing walls, ceilings, floors, roofs, materials, structures or systems, may require special handling, abatement or containment by a certified or licensed professional. It is the owner's responsibility to comply with					
e.	any and all requirements under this notification, State, Federal or other applicable laws, codes, regulations or standards.					
f	notifications, or approvals required to perform work pursuant this project is the sole responsibility of the owner.					
 f. This permit does not include any privilege or authority to disregard or violate any rule, regulation, code, law or requirement of The Town of Sidney or any other government body with authority to promulgate such rules, regulations, codes, laws or requirements. g. I HEREBY CERTIFY THAT I HAVE THE AUTHORITY TO MAKE THE FOREGOING APPLICATION AND THAT THE INFORMATION IS CORRECT. 						
	SIGNATURE:		DATE:			
		CODE OFFICER USE ONLY	Building Permit Fee \$			
APPLICA:	ΓΙΟΝ #	□C □R □RA □I □ Flood Zone	Septic Permit Fee \$			
APPLICA	TION RECEIVED:/	Permit: ☐ Approved ☐ Denied	Well Permit Fee \$ Deck Permit Fee \$			
☐ PLANNING BOARD APPROVAL REQUIRED		☐ ZBA APPROVAL REQUIRED	Permit Fee \$ TOTAL FEES PAID: \$			

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APPLICATION FOR BUILDING PERMIT ON SITE SEPTIC SYSTEM

FORM A1

	LOCATION OF PARCEL- Number & Street:					
3.	☐ Residential System	□Commercial System				
4.	What are the current dimensions of the current structure serviced by this system?					
5.	What are the square feet of the addition, alteration or renovation?					
6.	Type of installation: ☐ New Septic System - (Must submit an engineer's design with application) ☐ Replacement Tank - (Min. tank size 1000 gallon, dual chambered – special approval required for poly tanks) ☐ Replace Leach Field - (Need to supply an engineer's design with application) ☐ Drywell Replacement (May need to supply an engineer's design with application)					
	NOTE: Engineered design projects must include a plot plan sketch of the proposed location of all components of your system and the related distance to water wells, streams or ponds and property lines. (See sample site plan) Use form SP-1 or other document to map system and area land marks.					
7.	Has the current septic syste	em failed?	☐ Yes ☐ No ☐ N/A			
8.	Does the work include mov	ing the system to a new location?	☐ Yes ☐ No ☐ N/A			
9.	How many sleeping rooms	How many sleeping rooms will the new or upgraded system service?				
10.	How many sleeping rooms will the new or upgraded system service? feet.					
11	1. What is the distance from the leach field to the nearest potable water well feet.					
тт.	2. What is the distance from the leach field to the nearest lot line, property line or road, whichever is closer.					
	What is the distance from t	he leach field to the nearest lot line, property line o	or road, whichever is closer.			
12.	What is the distance from t Peculation test results:	he leach field to the nearest lot line, property line o	or road, whichever is closer.			
12. 13.	Peculation test results: Design professional who is NAME	designing the system:□Engineer □ Architect CELL: ()	·			
12. 13.	Peculation test results: Design professional who is NAME ADDRESS: TOWN:	designing the system: ☐Engineer ☐ Architect				
12. 13.	Peculation test results: Design professional who is NAME	designing the system:□Engineer □ Architect CELL: ()	·			
12. 13.	Peculation test results: Design professional who is NAME	designing the system: DEngineer Architect CELL: () PROOF OF WORKER'S COMPENSATION. SSUED WITHOUT PROOF OF WORKERS COMPENSATION	OMP OR AN EXEMPTION			
12. 13.	Peculation test results: Design professional who is NAME ADDRESS: TOWN: PHONE: () EMAIL I HAVE INCLUDED A NO PERMIT WILL BE I	designing the system: DENGINEER Architect CELL: (OMP OR AN EXEMPTION			
12. 13.	Peculation test results: Design professional who is NAME	designing the system: DENGINEER Architect CELL: (OMP OR AN EXEMPTION			

FORM A-1

THIS FORM MAY BE SUBSTITUTED WITH A SET OF ENGINEERED PLANS OR OTHER LEGIBLE DRAWING

SITE PLAN

A plot plan is a diagram of the property where construction is to take place. It is necessary to include a plot plan for all exterior construction on a parcel to demonstrate compliance with such things as set back requirements from property lines and roadways, distance requirements from septic systems to wells, ponds, lakes and streams. Drawings do not need to be to scale but distances indicated must be accurate.

DIRECTIONS

Draw a sketch of your property on a blank or graph paper indicating location of your well, septic, ponds, streams structures, etc. It is important to indicate the following distances:

☐ New construction to other Buildings, Property Lines and Road Shoulders.

☐ New construction to septic and wells, water ways and ponds.

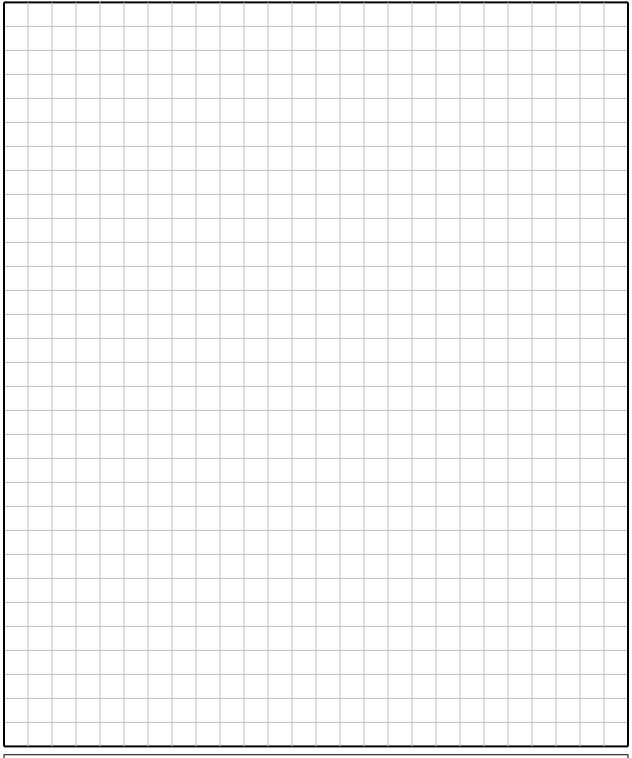
☐ Septic Systems in relation to Wells, Streams, Ponds, Lot Lines, Roads etc.

Well Pond 165' Stream Barn 113' 100 **TANK EXISTING** FIELD Garage HOUSE 10' **←** 50′ Septic **ROAD NEIGHBOR'S HOUSE**

EXAMPLE SITE PLAN

THIS FORM MAY BE SUBSTITUTED WITH A SET OF ENGINEERED PLANS OR OTHER LEGIBLE DRAWING

PROPERTY SITE PLAN WORK SHEET



PROPERTY OWNER:					
The site plan depicted on this document is true and accurate to the best of my knowledge.					
PROPERTY OWNER SIGNATURE:					
DATE:/ TAX MAP #					