

# APPLICATION FOR A BUILDING PERMIT

**INSTRUCTIONS:** COMPLETE BOTH PAGES IN INK AND SIGN ON THE BACK SIDE. INFORMATION IS AVAILABLE FROM BUILDING DEPT. IF UNKNOWN PROVIDE SITE AND STRUCTURAL DRAWINGS FOR YOUR PROJECT.

## **I. IDENTIFICATION**

Tax Map Id # \_\_\_\_\_

Project Address: \_\_\_\_\_ Town \_\_\_\_\_

Property Owner: \_\_\_\_\_ Telephone # \_\_\_\_\_ Cell \_\_\_\_\_

Address \_\_\_\_\_ Town \_\_\_\_\_

Applicant (if different): \_\_\_\_\_ Telephone # \_\_\_\_\_ Cell \_\_\_\_\_

Address \_\_\_\_\_ Town \_\_\_\_\_

Contractor Name, City and Phone # \_\_\_\_\_

Insurance Certificate on file      Yes    No      (required prior to issuance of permit)

## **II. PROJECT DESCRIPTION** (submit site plan w/ dimensions on separate sheet, drawings to be in black and white Two copy's)

Briefly describe project \_\_\_\_\_

Will this project involve the installation or modification of the -	Plumbing system?	Yes*	No
• If Electric System is modified, an Electrical Inspection is need by	HVAC system?	Yes*	No
A Third-party Agency,	Electric system?	Yes*	No

Review this section with the building department staff

- ZONING DISTRICT      AC, LR, MR, MH, CB, LI, AR-2
- CONSTRUCTION TYPE    n/a    New    Addition    Repair    Alteration
- FLOOR LEVEL (of work)    n/a    Basement      1<sup>st</sup>      2<sup>nd</sup>      Accessory Structure
- FOUNDATION      n/a    Crawl      Basement      Slab      Pier/Post
- FLOOD PLAIN AREA    Yes    No,      STEEP SLOPES    Yes    No

## **III. CONSTRUCTION COSTS**

Construction Costs for the work described in this application include the cost of all of the construction and other work done in connection therewith, exclusive of cost of the land. Estimate of costs may be determined by using the *Building Valuation Data* chart on file in the office.

**CONSTRUCTION COST** [Based on Contracted Labor and Material]      \$ \_\_\_\_\_

**CONTINUED ON BACK**

**PROPERTY DATA (answer all that is applicable)**

House Style	Ranch	2 story colonial	Split/Tri Level	Other
Square footage	N.A.	Existing _____	Proposed _____	
Basement	NA	Existing _____	Proposed _____	
# Bedrooms	N.A.	Existing _____	Proposed _____	
# Baths	N.A.	Existing _____	Proposed _____	
Garage	None	Attached	Detached	
Porch/Deck	N.A.	Existing _____	Proposed _____	
Heating type	N.A.	Existing _____	Proposed _____	A/C (Y or N)
Fireplace	Y <u>or</u> No	Gas <u>or</u>	Solid Fuel	
Septic	Repair _____	New _____		

**ACCESSORY STRUCTURES, AND DEMENTIONS,**

Shed \_\_\_\_\_, Deck \_\_\_\_\_, Pole Barn \_\_\_\_\_, Garage \_\_\_\_\_  
 Pool \_\_\_\_\_, Hot Tub/ Spa, \_\_\_\_\_, Generator \_\_\_\_\_

**IV. CERTIFICATION**

(CIRCLE ONE)

- **I HEREBY CERTIFY** that I am the [OWNER BUILDER AGENT OF OWNER]  
 And am authorized to make this application. I assert that the information provided is accurate to the best of my knowledge, and the project will be completed as specified.
- I authorize the Code Enforcement Official, or his designee, to enter upon the property to make inspections as prescribed in applicable local and state laws.
- Furthermore, I understand that progress inspections shall be made as required by law, and
- **NO BUILDING OR PROJECT SHALL BE OCCUPIED OR USED IN WHOLE OR IN PART UNTIL A CERTIFICATE OF USE / OCCUPANCY HAS BEEN ISSUED. IF A STRUCTURE IS USED PRIOR TO FINAL INSPECTION, A FINE MAYBE IMPOSED**

Signed \_\_\_\_\_ Date \_\_\_\_\_

Make checks payable to Town of Bristol,

**FOR OFFICIAL USE ONLY**

Date rec'd \_\_\_\_\_ Approved Denied If denied, Reason \_\_\_\_\_

• **TOTAL DUE** \$ \_\_\_\_\_ Cash \_\_\_\_\_ Check # \_\_\_\_\_

NOTES \_\_\_\_\_

***Town of Bristol,***  
**6740 County Rd 32 Canandaigua NY, 14424**  
**585-229-2440 of FAX 585-229-4319**