Village of Freeville Building Permit Application

INSTRUCTIONS: please complete this application, as follows, and return to the Village Clerk's Office for the Code Official to review:

- 1. Complete necessary information below, and sign.
- 2. Include a Plot Plan, as explained on page 3 of this application, and sign at bottom of page 3.
- 3. Review and sign page 4, regarding required inspections.
- 4. Provide proof of a Certificate of NYS Worker's Compensation Insurance for Contractors (C-105.2), or fill out an Affidavit of Exemption on page 5, (see page 5 for further information). Note that the Affidavit must be Notarized.
- 5. Include one set of construction specification drawings, with project-specific details. All commercial projects and all residential 1,500 sq feet+ or over \$20,000 require professionally approved plans.

Date:

- 6. Receive an approval for Sewer from Village DPW, or for septic system by Tompkins County Health Dept (if applicable).
- 7. Include any required approvals by the Planning Board, Variance Board, and/or Health Dept (if applicable).
- 8. Include Flood Plain application and approval (if applicable).

Name:

Mailing address:

9. Submit permit fee to Village of Freeville. The Clerk's Office will calculate the fee, based on current Fee Schedule.

Phone:	Phone:	Tax #:
Project location:		Project cost:
Description of work:		
Does proposal violate any laws, or	dinances, or regulations:	
Contractor's name & phone:		
List required documents which you	ı have included:	
CERTIFICATION: I hereby affirm und	ler penalty of perjury that all informa	ation provided in this application is complete, correct and
•		ccurate information contained in this application or its
=	·	is application. I understand I may be required to remove any
·	·	It of inaccurate information contained in this application or
_	-	rmit process and understand the requirements. I understand
•	•	pose whatsoever until a Certificate of Occupancy is issued.
mat no banding shan be occupied of	asea in whole of in part for any par	pose whatsoever until a certificate of occupancy is issued.
Owner(s) Signature:		Date:
5wilet (3) 3ignatare		
For questions regarding Building	Permits, or to schedule inspections, plea	se email deputyclerk@freevilleny.org or call (607) 844-8301
	FOR OFFICE USE	ONLY
This serves as a	valid Buildina Permit only when t	his box is completed & signed by the Code Official.
Tims serves as a	rana Bananig remme emy when e	no sox is compresed a signed by the code cyfician
Issued Date	OR	Denied Date
Expiration Date		Reason for Denial
Expiration bate		Neason for Demai
	<u> </u>	
	Code Official Sig	nature

PERMIT PROCESS: The following process is required according to Local Law and New York State Code

1.	Application must be completed and submitted with required paperwork and approvals, as listed on page 1.					
2.	Code Official will review the Application, and a permit will be issued upon approval. Code Official may require additional pertinent information (see below). Once approved, Building Permits are good for 1 year. Permit should be prominently displayed on the premises. No construction shall begin until permit has been issued.					
3.	Applicant/owner/contractor shall call to schedule all necessary inspections during the construction process: Footing Foundation Framing Plumbing HVAC Insulation Final Other					
4.	Electrical Inspection must be completed by a certified, third party electrical inspector during and upon completion of system: Rough-In Final					
5.	Upon completion of construction a final inspection is required, approval for the Septic System is required, and a					

WHEN COMPLETED, ALL PERMITS MUST BE CLOSED WITH A CO/CC PRIOR TO OCCUPANCY OR USE

completed and before anyone can move in, a Certificate of Occupancy is required by Local and NYS Law.

final Electrical Certificate is required along with any other required certifications or inspections. Once the above is

Additional Building Permit Paperwork

Upon review of your Building Permit Application, the Code Official may require more information to issue a permit.

Things that are checked <u>YES</u> are needed.

No permit will be issued until **all** necessary information is provided, **NO EXCEPTIONS**.

YES	INCLUDED	N/A		
			Copy of Tax Map	
			Plot Plan	
			Notification to Village Department of Public Works	
			Notification to Village Fire Department	
			Copy of County Septic Permit	
			Building Permit Application	
			Workers' Compensation forms (2) and copy of Insurance or CE200	
			Diagrams of the Structure (top and side view)	
			Commercial projects or Residential over 1,500 sq. ft. and/or over \$20,000 require	
			professional drawings	
			Varience or Special Permit acceptance letter	
			Local Laws/Subdivisions/Ordinances	
			Minimum maintenance Road	
			Flood Plain Area	
			Storm Water Pollution Prevention Plan	

Plot Plan

ner Name	
ation	Tax Map #
Size	Ft Road Frontage
You can use this sheet to draw your Plot Plan, or inclu	ude a separate document with all points listed below.
If using this sheet, use the line below as your road fro	ontage, and sketch your lot, including the following:
a. all existing structures on the propertyb. location/proposed location of well and septic or sewerc. proposed location of new structure/addition	r (whichever is applicable to your property)
 d. distance from the proposed/new structure to i. all property lines: (minimums for <u>principal bufor detached accessory building</u>: 50' from from ii. existing structures (10 ft minimum) iii. well and septic or sewer line (whichever is appreciated) 	
Note: If installing a septic system, plans must be approved by applying for a permit.	y the Tompkins County Environmental Health Department prior to
This live answer of the	
inis line represents the	center line of the road or right of way
accurate and contains no misleading information. I furt this plot plan or its attachments automatically invalidate remove any building, structure or other construction star	rjury that all of the information provided in this Plot Plan is compher understand that any false or inaccurate information contained as all permits issued as a result. I understand I may be required to rted or completed as a result of inaccurate information contained have read these instructions and understand the local requirement
Applicant Signature	Date

Required Building Inspections

Dear Building Permit Holder:

The issuance and finalization of this building permit is contingent upon all required inspections being performed at the required intervals. Please contact this office to schedule the inspections.

- 1. Pre-inspection site location.
- 2. **Footers/pad:** Once the footers/pads formed, prior to pouring concrete.
- 3. **Foundations:** Once the anchor bolts, sill plates, and perimeter drains are in place, prior to backfilling and/or framing.
- 4. **Framing**: Once the framing is 100% complete, prior to sheet rocking.
- 5. **Plumbing:** All lines will be pressure tested using water or air.
- **6. Electrical**: An approved certified electrical inspection agency shall do all inspections and issue a certificate prior to final inspection.
- 7. **Insulation:** Once vents are in place and the insulation has been installed, prior to sheet rocking.
- 8. **Final inspection:** Once everything has been completed, you are not to occupy or use the building or area until a final inspection has been done and the appropriate certificate had been issued.

Please contact the Village Clerk's Office to set up a time for all inspections.

NOTE: APPROVAL BY THE VILLAGE CODE OFFICIAL DOES NOT RELINQUISH THE OWNER'S RESPONSIBILITY TO ADHERE TO ALL LOCAL LAWS AS WELL AS THE NEW YORK STATE BUILDING AND FIRE PROTECTION CODES.

I authorize the Village of Freeville Code Official to conduct these inspections.							
Applicant Signature	Date	Permit #					

Affidavit of Exemption to Show Specific Proof of Workers' Compensation Insurance Coverage for a 1, 2, 3 or 4 Family, Owner-occupied Residence

This form cannot be used to waive the workers' compensation rights or obligations of any party.

(including specific	ng condominiums) listed on the bu	at I am the owner of the 1, 2, 3 or 4 family, owner-occupied resident building permit that I am applying for, and I am not required to should not not required to should not not residence because (please check	now				
	I am performing all the work for which the building permit was issued.						
	I am not hiring, paying or compensating in any way, the individual(s) that is(are) performing all the work for which the building permit was issued or helping me perform such work.						
	I have a homeowners insurance policy that is currently in effect and covers the property listed on the attached building permit AND am hiring or paying individuals a total of less than 40 hours per week (aggregate hours for all paid individuals on the jobsite) for which the building permit was issued.						
♦ a fo	forms approved by the Chair of the I the building permit if I need to hire o	appensation coverage and provide appropriate proof of that coverage e NYS Workers' Compensation Board to the government entity issue or pay individuals a total of 40 hours or more per week (aggregate houte) for work indicated on the building permit, or if appropriate, file a Country of the coverage and provide appropriate and the coverage appropriate appropriate and the coverage appropriate	uing ours				
(i w o p	have the general contractor, performing the work on the 1, 2, 3 or 4 family, owner-occupied residence (including condominiums) listed on the building permit that I am applying for, provide appropriate proof of workers' compensation coverage or proof of exemption from that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit if the project takes a total of 40 hours or more per week (aggregate hours for all paid individuals on the jobsite) for work indicated on the building permit.						
	(Signature of Homeowner)	(Date Signed)					
	Wang Drinted)	Home Telephone Number					
·	Homeowner's Name Printed) y Address that requires the building	Sworn to before me this day of,					
		County Clerk or Notary Public)					

Once notarized, this BP-1 form serves as an exemption for both workers' compensation and disability benefits insurance coverage.

BP-1 (12/08) NY-WCB