

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

Name:		Date:
Mailing address:		
Phone:	Phone:	Tax #:
Project location:		Project cost:
Description of work:		
Does proposal violate any laws, ordinances, or regulations:		
Contractor's name & phone:		
List required documents which you have included:		

CERTIFICATION: I hereby affirm under penalty of perjury that all information provided in this application is complete, correct and contains no misleading statements. I further understand any false or inaccurate information contained in this application or its attachments automatically invalidates all permits issued as a result of this application. I understand I may be required to remove any building, structure, or other construction started or completed as a result of inaccurate information contained in this application or its attachments. I further certify that I have read the instructions and permit process and understand the requirements. I understand that no building shall be occupied or used in whole or in part for any purpose whatsoever until a Certificate of Occupancy is issued.

Owner(s) Signature: _____ Date: _____

For questions regarding Building Permits, or to schedule inspections, please email deputyclerk@freevillenyny.org or call (607) 844-8301

FOR OFFICE USE ONLY	
<i>This serves as a valid Building Permit only when this box is completed & signed by the Code Official.</i>	
_____ Issued Date:	_____ Denied Date:
_____ Expiration Date:	_____ Reason for Denial
_____ Code Official Signature	

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 final Electrical Certificate is required along with any other required certifications or inspections. Once the above is completed and before anyone can move in, a Certificate of Occupancy is required by Local and NYS Law.

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

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 **YES** 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
			Variance or Special Permit acceptance letter
			Local Laws/Subdivisions/Ordinances
			Minimum maintenance Road
			Flood Plain Area
			Storm Water Pollution Prevention Plan

Plot Plan

Owner Name _____
Location _____
Lot Size _____

Date _____
Tax Map # _____
Ft Road Frontage _____

You can use this sheet to draw your Plot Plan, or include a separate document with all points listed below.

If using this sheet, use the line below as your road frontage, and sketch your lot, including the following:

- a. all existing structures on the property
- b. location/proposed location of well and septic or sewer (whichever is applicable to your property)
- c. proposed location of new structure/addition
- d. distance from the proposed/new structure to:
 - i. all property lines (50' minimum to front lot line, 75' minimum to shoulder of road, 20' to all other property lines)
 - ii. existing structures (10 ft min.)
 - iii. well and septic or sewer line (whichever is applicable)

Note: If installing a septic system, plans must be approved by the Tompkins County Environmental Health Department prior to applying for a permit.

This line represents the center line of the road or right of way

CERTIFICATION: I hereby affirm under penalty of perjury that all of the information provided in this Plot Plan is complete, accurate and contains no misleading information. I further understand that any false or inaccurate information contained in this plot plan or its attachments automatically invalidates all permits issued as a result. I understand I may be required to remove any building, structure or other construction started or completed as a result of inaccurate information contained in this Plot Plan or its attachments. I further certify that I have read these instructions and understand the local requirements.

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.*****

Under penalty of perjury, I certify that I am the owner of the 1, 2, 3 or 4 family, **owner-occupied** residence (including condominiums) listed on the building permit that I am applying for, and I am not required to show specific proof of workers' compensation insurance coverage for such residence because (please check the appropriate box):

- 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.

I also agree to either:

- ◆ acquire appropriate workers' compensation coverage and provide appropriate proof of that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit if I need to hire or pay individuals 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, or if appropriate, file a CE-200 exemption form; OR
- ◆ 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)

(Homeowner's Name Printed)

Home Telephone Number _____

Property Address that requires the building permit:

<p><i>Sworn to before me this _____ day of _____,</i></p> <p>_____</p> <p><i>(County Clerk or Notary Public)</i></p>
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Once notarized, this BP-1 form serves as an exemption for both workers' compensation and disability benefits insurance coverage.