



TOWN OF SOMERSET

APPLICATION FOR A BUILDING PERMIT

No _____

PART 1: GENERAL INFORMATION

Date: _____

1. Project location

Number and Street Address: _____

Tax Map Number: _____

Current Use of Property: _____

2. Owner Information

Owners Name: _____

Address of Owner: _____

City, State, Zip: _____

Phone Number: _____

3. Type of Construction or Improvement (check all that applies)

New Building _____ Addition _____ Residential _____

Relocation _____ Remodel _____ Business _____

Alteration _____ Demolition _____ Ind/Com. _____

Repair or Replacement _____

Misc. Structure or Equipment _____

4. Description of Project: _____

5. Estimated Project Cost: _____

DO NOT WRITE BELOW THIS LINE – OFFICAL USE ONLY

Date Received: ___/___/___

Received By: _____

Cost of Permit: _____

PART 2: DESIGNERS AND CONTRACTORS

NOTE: ALL CONTRACTORS MUST PROVIDE A CERTIFICATE OF INSURANCE TO THIS OFFICE BEFORE A BUILDING PERMIT CAN BE ISSUED.

1. Architect/Engineer: Name: _____
Address: _____
City, State, Zip: _____
Phone Number: _____

2. General Contractor: Name: _____
Address: _____
City, State, Zip: _____
Phone Number: _____

3. Electrical Contractor: Name: _____
Address: _____
City, State, Zip: _____
Phone Number: _____

4. Plumbing Contractor: Name: _____
Address: _____
City, State, Zip: _____
Phone Number: _____

5. Insulation Contractor: Name: _____
Address: _____
City, State, Zip: _____
Phone Number: _____

6. Concrete/Foundation/Site Contractor
Name: _____
Address: _____
City, State, Zip: _____
Phone Number: _____

7. Other
Name: _____
Address: _____
City, State, Zip: _____
Phone Number: _____

PART 3: PROJECT LOCATION AND DETAILS

Please attach a sketch of plot plan!

A sketch of the work to be performed must be a part of the application. The sketch must include the following:

1. The distance of the proposal from all lot lines.
2. The distance of the proposal from any structure including neighboring structures;
3. The depth of the proposals footers and/or foundations;
4. Addition will be used as: Family Room__ Living Room__ Bedroom__ Bath__
Kitchen__ Den__ Other_____
5. Basement: Full__ Partial__ Crawl__ Pier__ Slab__
6. Garage: Attached__ Detached__
7. Decks/Porches: Open__ Covered__ Enclosed__ Screened__ Other_____
8. Location of the proposed structure or addition showing the number of stories and all exterior dimensions.

IMPORTANT NOTICES: READ BEFORE SIGNING.

1. Work conducted pursuant to a Building Permit must be visually inspected by the Code Enforcement Officer and must conform to the New York State Uniform Fire and Building Codes, The Code of the Town of Somerset and all other applicable codes, rules or regulations.
2. It is the owners responsibility to contact the Code Enforcement Officer at 795-9556 at least 24 hours before the owner wishes to have the inspection done. More than one inspection may be necessary. This is especially true for "internal work" wish will eventually be covered from visual inspection by additional work. (i.e. electrical work later to be covered by drywall).
DO NOT PROCEED TO THE NEXT STEP OF CONSTRUCTION IF SUCH INTERNAL WORK HAS NOT BEEN INSPECTED. Otherwise, work may need to be removed at the owner or contractors expense to conduct the interior inspection. Close coordination with the Code Enforcement Officer will greatly reduce this possibility.
3. **OWNER HEREBY AGREES TO ALLOW THE CODE ENFORCEMENT OFFICER TO INSPECT THE SUFFICIENCY OF THE WORK BEING DONE PERSUANT TO THIS PERMIT, PROVIDED HOWEVER, THAT SUCH INSPECTION(S) IS (ARE) LIMITED TO THE WORK BEING CONDUCTED PURSUANT TO THIS PERMIT AND ANY OTHER NON-WORK RELATED VIOLATIONS WHICH ARE READILLY DISCERNABLE FROM SUCH INSPECTION(S).**

4. New York State law requires contractors to maintain Workers' Compensation and Disability Insurance for their employees. No permit will be issued unless a current valid Worker's Compensation and Disability Insurance certificates are attached to this application or are on file with the Bureau of Fire Prevention and Inspection Services. If the contractor believes he or she is exempt from the requirements to provide Workman's Comp/Disability Benefits, the contractor must complete form C-105.21, attached hereto.
5. If a Certificate of Occupancy is required, the structure shall not be occupied until said certificate is issued.
6. This permit DOES NOT include any privilege of encroachment in, over, under, or upon any street or right-of-way.
7. The building permit card must be displayed so as to be visible from the street nearest to the site of the work being conducted.

I, _____, the above named applicant, hereby attest that I am the lawful owner of the property described within or I am the lawful agent of said owner and affirm under the penalty of perjury that all statements made by me on this application are true.

(Signature) _____ Date: _____