



**Town of Day**  
 Code Enforcer/Building Dept.  
 1650 North Shore Road  
 Hadley NY, 12835

Permit # \_\_\_\_\_  
 Issued Date \_\_\_\_\_  
 Expiration Date \_\_\_\_\_

**Building Permit Application**

**ALL CONSTRUCTION TO BE IN COMPLIANCE WITH "NEW YORK STATE UNIFORM FIRE PREVENTION AND BUILDING CODE" AND "TOWN OF DAY ORDINANCE".**

**Bill Farr**

Code Enforcement Officer  
 Phone: (518) 696-3789 ext. 0  
 Fax #: (518) 696-6402  
 Email: codes@townofday.com



**GENERAL INFORMATION**

Tax Map No. \_\_\_\_\_ Ownership: Private \_\_\_\_\_ Public \_\_\_\_\_  
 PDD/Subdivision Name \_\_\_\_\_  
 Variance No. \_\_\_\_\_ Site Plan No. \_\_\_\_\_

**APPLICANT INFORMATION**

Name \_\_\_\_\_ Position \_\_\_\_\_ Organization \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone # \_\_\_\_\_ Ext. \_\_\_\_\_ Email Address \_\_\_\_\_

**PROPERTY OWNER INFORMATION**

Name \_\_\_\_\_ Position \_\_\_\_\_ Organization \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone # \_\_\_\_\_ Ext. \_\_\_\_\_ Email Address \_\_\_\_\_  
 Liability/Home Owners Insurance Carrier \_\_\_\_\_ Policy# \_\_\_\_\_

**PROPOSED CONSTRUCTION LOCATION**

Street No. \_\_\_\_\_ Street Name \_\_\_\_\_  
 Apartment No. \_\_\_\_\_ Town \_\_\_\_\_  
 Fire District \_\_\_\_\_ Zoning District \_\_\_\_\_

**LOT INFORMATION**

Lot Dimensions- Feet Wide \_\_\_\_\_ Feet Deep \_\_\_\_\_ Lot Area \_\_\_\_\_ Square Feet \_\_\_\_\_  
 Acres \_\_\_\_\_ Front Yard Setback \_\_\_\_\_ Rear Yard Setback \_\_\_\_\_ Frontage \_\_\_\_\_  
 Left Yard Setback \_\_\_\_\_ Right Yard Setback \_\_\_\_\_ Characteristics \_\_\_\_\_

**PROPERTY USE INFORMATION**

Existing Use \_\_\_\_\_ Proposed Use \_\_\_\_\_  
 Occupancy \_\_\_\_\_ Construction \_\_\_\_\_ Fire Hazard \_\_\_\_\_

**TYPE OF WORK BEING DONE**

New \_\_\_\_\_ Addition \_\_\_\_\_ Alteration \_\_\_\_\_ Change of Tenant \_\_\_\_\_ Other \_\_\_\_\_

**PROPOSED CHANGES**

Height \_\_\_\_\_ Actual Stories \_\_\_\_\_ Largest Fire Area \_\_\_\_\_ Total Size \_\_\_\_\_ sq ft Living Area \_\_\_\_\_ sq ft  
 Type of Frame \_\_\_\_\_ Type of Foundation \_\_\_\_\_ No. of Rooms (exclude bathrooms) \_\_\_\_\_  
 No. of Bathrooms \_\_\_\_\_ No. of Bedrooms \_\_\_\_\_ Primary Heat System \_\_\_\_\_ Type of Fuel \_\_\_\_\_  
 Sprinklers \_\_\_\_\_ No. of Fireplaces \_\_\_\_\_ No. of Woodstoves \_\_\_\_\_ Central Air Conditioning \_\_\_\_\_  
 Utilities: Septic \_\_\_\_\_ Sewer \_\_\_\_\_ Well \_\_\_\_\_ Public Water \_\_\_\_\_ Private Water \_\_\_\_\_  
 Style \_\_\_\_\_ Garage: Attached \_\_\_\_\_ Detached \_\_\_\_\_ # of Cars \_\_\_\_\_

**ARCHITECT/ENGINEER INFORMATION**

Name \_\_\_\_\_ Position \_\_\_\_\_ Organization \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone # \_\_\_\_\_ Ext. \_\_\_\_\_ Email Address \_\_\_\_\_  
 Professional License Number \_\_\_\_\_ State \_\_\_\_\_



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### Building Permit Application

#### CONTRACTOR INFORMATION

Name \_\_\_\_\_ Position \_\_\_\_\_ Organization \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone # \_\_\_\_\_ Ext. \_\_\_\_\_ Email Address \_\_\_\_\_

**\*\*Attach Current Liability and Disability Insurance Binders\*\***

**SUBCONTRACTOR NAME, ADDRESS, PHONE # & EMAIL ADDRESS** If needed, attach a list.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### COST AND FEES

Estimated Cost of Project \$ \_\_\_\_\_ Building Permit Fee \$ \_\_\_\_\_ Sewer Permit Fee \$ \_\_\_\_\_ Other Fees \$ \_\_\_\_\_

#### ADDITIONAL DOCUMENTS REQUIRED TO BE SUBMITTED WITH THIS APPLICATION

Two (2) Complete Sets of Plans \_\_\_\_\_ Plot Plan \_\_\_\_\_ Energy Audit \_\_\_\_\_ Materials List \_\_\_\_\_  
Sewer Permit Application \_\_\_\_\_ Contractor Insurance Doc's \_\_\_\_\_

#### INFORMATION TO BE NOTED

- A letter is required from the Highway Superintendent with the below information, if a culvert is needed for driveway access for the proposed location:
  - Diameter of culvert
  - Material of culvert
  - Length of culvert
- If property is in the Adirondack Park, a letter of determination is needed from the A.P.A.
- NO building shall be occupied or used in whole or in part for any purpose whatsoever until an application is made for, and a Certificate of Occupancy shall have been granted by the Building Inspector.
- Code of the Town of Day § 63-10
  - Inspections. The Building Inspector or Code Enforcement Officer shall have the authority to inspect, at reasonable times, any private or public property for the purpose of investigating conditions relative to enforcement of this chapter, the New York State Uniform Fire Prevention and Building Codes.

**I swear to the best of my knowledge and belief the statements contained in this application, together with the plans and specifications submitted, are a true and complete statement of all proposed work to be done on the described premises and that all provisions of the BUILDING CODE, the TOWN ORDINANCE, and all other laws pertaining to the proposed work shall be complied with, whether specified or not, and that such work is authorized by the owner.**

**SIGNATURE** \_\_\_\_\_  
Property Owner or Owner's Agent

**DATE** \_\_\_\_\_

**When and if permit is granted, all permits must be posted in full view of a public right of way on location where construction is taking place.**

**BELOW THIS LINE TO BE COMPLETED BY THE BUILDING DEPARTMENT**

#### ACTION ON APPLICATION

Permit Granted Date \_\_\_\_\_ Signed \_\_\_\_\_  
Permit Denied Date \_\_\_\_\_ Signed \_\_\_\_\_  
Reason for Denial \_\_\_\_\_

Variance/ Special Permit Requested By \_\_\_\_\_ Date \_\_\_\_\_  
Variance/ Special Permit Granted By \_\_\_\_\_ Date \_\_\_\_\_  
Certificate of Occupancy Granted By \_\_\_\_\_ Date \_\_\_\_\_  
Certificate of Compliance Granted By \_\_\_\_\_ Date \_\_\_\_\_