

# Village of Fayetteville

Building and Zoning  
425 East Genesee Street  
Fayetteville, NY 13066



## Building Permit Application

### PROCEDURE

#### **Submit the following required items with your completed application:**

[\*These may vary according to the project\* ]

- Complete all applicable sections of the Building Permit Application**
- All applicable parties must provide their notarized signatures on the application.**
- Copy of the survey indicating current and proposed structure locations, dimensions and setbacks**
- Approved SPDES Permit from NYSDEC (If disturbing one acre or more of land)**
- Building Plans** (Stamped by licensed NYS architect/engineer when value of construction exceed \$20,000, when construction exceeds 1500 Sq. Ft., or when construction involves structural work)
- Energy Code Certification** (Signed by the builder or registered design professional)
- Truss Design Sheets or Certificates** (Signed by the builder or registered design professional)
- Electrical permit** > (See list of approved electrical inspectors.)
- Plumbing permit** > must be filed with the Onondaga County Plumbing Control Department
- Insurances Required:**
  - Liability Insurance Certificate ○ INSURED/SELF INSURED
  - \*NYS Disability Benefits Coverage ○ INSURED/SELF INSURED: DB-120.1 or DB-155
  - \*Worker's Compensation Insurance Certificate ○ INSURED: Form C-105.2 or U-26.3
    - SELF INSURED: Form SI-12 or Form GSI-105.2
    - EXEMPT: [Form CE-200](#)
    - HOMEOWNER (Owner-occupied): [Form BP-1](#) (If you are performing all of the work for which the building permit was issued/not hiring or compensating individuals doing the work/have a homeowners insurance policy in effect at the property and are hiring or paying individuals for a total of less than 40 hours a week)
    - CONTRACTOR: EPA lead based paint renovators certificate for any residential, public or commercial building built before 1978 where renovations disturb six square feet or more of interior painted surface per room and/or exterior work which disturbs over 20 square feet of painted surface.

\*ACCORD forms are NOT acceptable proof of Worker's Compensation Coverage or Disability Benefits Insurance

**D) An application is considered complete once all applicable required items have been received. The Codes Enforcement Officer has 10 business days to review a completed application and to approve or deny same.**

**E) All applicable inspections listed on the Building Permit are MANDATORY. Please call 48 hours in advance to schedule inspections.**

**F) Building Permit shall be valid for 6-months. If project is not finished after the 6-month expiration, the permit may be renewed for an additional 6 month period. If the project is not finished after the one year expiration date, a renewal fee will be charged.**

**G) Construction Debris - will not be picked up by the village DPW if generated by a third party contractor; such debris would require a licensed hauler to transport and dispose.**

# BUILDING PERMIT APPLICATION

(All applicable sections of this application must be completed – incomplete applications will not be considered.)

Project Address: \_\_\_\_\_ Tax map #: \_\_\_\_\_

Zoned: \_\_\_\_\_ Subdivision Name: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Contact: \_\_\_\_\_

Address: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Tenant (If applicable) : \_\_\_\_\_ Contact: \_\_\_\_\_

Address: \_\_\_\_\_ Phone number: \_\_\_\_\_

Contractor: \_\_\_\_\_ Contact: \_\_\_\_\_

Address: \_\_\_\_\_ Phone number: \_\_\_\_\_

TYPE OF WORK (check all that apply):

Single Family House

Commercial/Industrial Building

Repairs

Detached Garage/ Pole Barn/Accessory Building

Addition

Shed

Alterations

Manufactured Home

Deck/Porch

Other: \_\_\_\_\_

Swimming Pool

Circle: (In ground) (Above Ground) ( Hot Tub/Spa)

Description of the proposed project and its proposed use: - \_\_\_\_\_

Project Use: [ ] Residential [ ] Commercial [ ] Other: \_\_\_\_\_

Project Dimensions: Width: \_\_\_\_\_ Length: \_\_\_\_\_ Height: \_\_\_\_\_ Sq. Ft.: \_\_\_\_\_

Distance from lot lines: Front: \_\_\_\_\_ Rear: \_\_\_\_\_ Side1: \_\_\_\_\_ Side 2: \_\_\_\_\_

Lot Frontage: \_\_\_\_\_ Lot Depth: \_\_\_\_\_

Estimated value of all work – materials and labor: \$ \_\_\_\_\_

Will the proposed construction cause the disturbance of 1 or more acre of soil? \_\_\_\_\_

Is the project in a flood hazard zone? \_\_\_\_\_ (if yes, a Flood Permit application is required)

Is the project within 100' of any wetlands? \_\_\_\_\_ (If yes, the survey must show the location of the wetlands)

New York State law requires that all plans, drawings and specifications relating to the construction or alteration of buildings or structures bear the original seal and signature of a NYS licensed Professional Engineer or Registered Architect when value of construction exceeds \$20,000, when construction exceeds 1500 Sq. Ft., or when construction involves structural work

Architect: \_\_\_\_\_ RA \_\_\_\_\_ PE \_\_\_\_\_ Lic. #: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Applicant Certification:** I hereby certify that I have read the instructions and examined this complete application and know the same to be true and correct. That all work done under this permit will comply with the requirements of the New York State Uniform Fire prevention and Building Code, the Village of Fayetteville Zoning Ordinance and all other applicable regulations. I also understand that the granting of this permit does not presume to give authority to violate or cancel the provisions of any other State or Local Law regulating construction or land use or the performance of construction. **INSPECTIONS REQUIRED:** I understand that I am responsible to ensure that the required building inspections listed on the reverse side of this application are performed as construction progresses and that in no case shall construction proceed beyond any required inspection until such construction has been approved by the Code Enforcement Officer. **CONSENT TO ENTER PROPERTY:** I recognize that by signing this application, I am giving consent to the Code Enforcement Official of the Village of Fayetteville to enter the subject property for the purpose of obtaining information relevant to the processing of this application. I also understand that by acceptance of a permit, I agree to allow representatives of the Village of Fayetteville access to the property covered by the permit, at reasonable times, for the purpose of ascertaining compliance with the permit.

**Property Owner Name:** \_\_\_\_\_

Property Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_, ss.:

On this day, personally appeared before me \_\_\_\_\_, to me known to be the person(s) described in and who executed the within and foregoing instrument, and acknowledged that he/she signed the same as his/her voluntary act and deed, for the uses and purposes therein mentioned. Witness my hand and official seal hereto affixed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

**Property Tenant Name:** \_\_\_\_\_

Property Tenant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_, ss.:

On this day, personally appeared before me \_\_\_\_\_, to me known to be the person(s) described in and who executed the within and foregoing instrument, and acknowledged that he/she signed the same as his/her voluntary act and deed, for the uses and purposes therein mentioned. Witness my hand and official seal hereto affixed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

**Property Contractor Name:** \_\_\_\_\_

Property Contractor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_, ss.:

On this day, personally appeared before me \_\_\_\_\_, to me known to be the person(s) described in and who executed the within and foregoing instrument, and acknowledged that he/she signed the same as his/her voluntary act and deed, for the uses and purposes therein mentioned. Witness my hand and official seal hereto affixed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

DATE SUBMITTED:	DATE REVIEWED:	APPROVED BY:
PERMIT# :	DATE DENIED:	DENIED BY:
PERMIT FEE:	DEPOSIT AMOUNT:	DATE NOTIFIED:
PLANNING BOARD:	ZONING BOARD:	REASON DENIED:
Onon.County Health Dept. Inspected:_____ Passed / Failed	Approved Electrical Inspector Inspected:_____ Passed / Failed	Onon.County Plumbing Inspected:_____ Passed / Failed