**Owner: Permit #:**

**Tax Map #: Fee: $**

**Date:**

**Mailing Address of Owner:**

**Owner Telephone #: (Day)** **(Evening)**

|  |  |
| --- | --- |
| Email |  |

**Applicant, if other than the Owner:**

**Applicant phone #: (Day)** **(Evening)**

|  |  |
| --- | --- |
| Email |  |

**Lot Size:**

**E-911 Property Address:**

**Est. Cost of Construction:** $ **Square Footage:**

**From Foundation: Footage of: Front yard:**

**Side yard:**

**Rear yard:**

**Building is to be occupied as:**

**Is this a change in the primary use of an existing building?**

**Type of Construction/Description**

***(CHECK ALL THAT APPLY)***

**Building**:

\_\_\_ New House / Building

\_\_\_ Apartment Building

\_\_\_ Add to Existing Building

\_\_\_ Alterations to Existing Building

\_\_\_ Enclosing a Porch

\_\_\_ Deck / Porch

\_\_\_ Garage / Carport

\_\_\_ Mobile Home

\_\_\_ Manufactured Home

\_\_\_ Roofing

\_\_\_ Solar

\_\_\_Workshop

\_\_\_ Storage Shed \_\_\_ Sq ft

\_\_\_ Masonry Chimney

\_\_\_ Manufactured Chimney

\_\_\_ Fuel Burning Device

\_\_\_Swimming Pool =\> 24”

\_\_\_Fence < 6’ Tall

\_\_\_Relocating Existing Building

\_\_\_ New Septic System **Must have stamped plans**

\_\_\_ Other -\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Construction**

\_\_\_ Type 1 Non-Combustible

\_\_\_ Type 2 Fire Resistive

\_\_\_ Type 3 Fire Resistive

\_\_\_ Type 4 Heavy Timber

\_\_\_ Type 5 Combustible

\_\_\_ Other-

**Heating**

\_\_\_ Propane/LP

\_\_\_ Fuel Oil

\_\_\_ Electric

\_\_\_ Other-\_\_\_\_\_\_\_

**Fuel Type**

\_\_\_ Hot Air/HVAC

\_\_\_ Oil Hot Water

\_\_\_ Other-\_\_\_\_\_\_\_

**Basement**

\_\_ Full

\_\_ Half

\_\_ Quarter

\_\_ Utility

\_\_ Laundry

**Plumbing**

# of

\_\_ bathrooms

\_\_ toilets

\_\_ sinks

**Bedrooms:**

#\_\_\_\_

**Porches**

\_\_\_ Enclosed

\_\_\_ Glass

\_\_\_ Open

\_\_\_ Other –

**Exterior**

\_\_\_ Shingles

\_\_\_ Clapboard

\_\_\_ Stucco

\_\_\_ Board & Batten

\_\_\_ Aluminum

\_\_\_ Vinyl

\_\_\_ Other- \_\_\_\_\_\_\_\_\_\_\_\_\_

**Roof**

\_\_\_ Shingle

\_\_\_ Slate

\_\_\_ Tile

\_\_\_ Metal

\_\_\_ Membrane

\_\_\_ Built Up

\_\_\_ Other – \_\_\_\_\_\_\_\_\_\_

1. Is this site within a flood plain?
2. Is the site in whole or in part a designated wetland?
3. Is the site under APA jurisdiction?
4. Is the site under local Zoning / Planning jurisdiction?
5. Choose all the following choices that describe the provisions for water and sewer:

\_\_\_ Public Water System

\_\_\_ New Private Well

\_\_\_ Prior Existing Private Well

\_\_\_ Public Sewer System

\_\_\_ New Septic System

\_\_\_ Prior Existing Septic System

\_\_\_ Other-\_\_\_\_\_\_\_\_\_

**Worker’s Compensation & Disability Policy #:**

 Or **Exemption #:**

**IF APPLICABLE**

**Architect or Engineer:**

 Address:

 Phone:

**General Contractor:**

 Address:

 Phone:

**Electrical Contractor:**

 Address:

 Phone:

**Plumbing Contractor:**

 Address:

 Phone:

**\*Contractors must provide a certificate of insurance naming the Town of Elizabethtown as a certificate holder. If the job does not require a contractor, the affidavit of exemption on this application must be completed and notarized.**

Briefly describe what is to be done:

**PLANS & SPECIFICATIONS MUST ACCOMPANY THIS APPLICATION**

**For any permit not requiring stamped plans per State Education Law, Sections 7307 & 7209, please provide design plans for construction by either:**

* **Attaching to this application a copy of the plan**

**Please include the name of street, correct distance from foundation to lot lines, including frontage \*side & rear distances). Indicate where water supply and sewer lines are or will be located including distance apart, depth, etc. If construction is to be an addition to an existing building or an accessory building (garage, storage shed, etc.) indicate the size of current building and distance from foundation to lot lines or addition and/or accessory building.**

**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 homeowner’s insurance policy that is currently in effect and covers the property listed on the attached building permit.

□ I am hiring contractors and will provide a copy of his/her Workers Compensation Insurance Form C-105.2.

**I also agree to either:**

□ Acquire appropriate workers’ compensation coverage and provide appropriate proof of the 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.

□ 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.

**APPLICANT CERTIFICATION:**

As owner or authorized representative of the building, structure or land to which this permit applies, I agree to save the Town of Elizabethtown harmless from any and all damages, judgments, costs or expenses which said Town may incur or suffer by reason of the granting of this permit. I acknowledge that nothing contained herein, including the application and an approval herein granted for a project, shall be construed as an assertion of compliance with any requirements of the provisions of the Adirondack Park Agency Act, or the Department of Health, or the Department of Environmental Conservation, or the State of New York Rules and Regulations. The Town of Elizabethtown makes no representation pertaining to the applicant’s compliance with any governmental laws rules or regulations other than the building code of the Town of Elizabethtown and assumes no obligation for notification and coordination in connection therewith. The Town of Elizabethtown also makes no representation as to the existence of any other public right or the private rights of an individual or corporation with respect to a project.

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

 *Signature of Homeowner* *Date Signed*

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

 *Homeowner’s Name Printed*  *Home Telephone Number*

**\*If the owner’s signature is not present, a signed authorization must accompany this application. \***

**Applicant, if different than owner:**

I hereby certify that the information contained in this application is correct and that I am aware of the requirements of New York State Uniform Fire Protection and Building Code and will provide a copy of Workers Compensation Insurance (Form C-105.2)

Property address that requires the building permit:

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

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

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

Sworn to before me this \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

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

 (County Clerk or Notary Public)

**WORKSHEET**

**Footings**

Width\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Depth\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Feet Below Grade\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reinforcement\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Doors**

Exterior\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Size\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Interior Size\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Piers**

Type\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Size\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spacing\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Feet Below Grade\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**First Floor System**

Species\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Joist Size\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Span\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spacing\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sheathing\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Foundation**

Type\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Size\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Height\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Feet Below Grade\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type Waterproofing\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Anchor Bolts\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Insulation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Type\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 R-value\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Int or Ext\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Slab**

Type\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thickness\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vapor Barrier\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reinforcement\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Bearing Beams**

Species\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Size\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Span\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spacing\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Columns**

Size\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spacing\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Ceiling Joist**

Species\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Span\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spacing\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Windows**

Header Size\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

R.O. Size\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of Window\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Glazing U-factor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Wall Framing**

Species\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Size\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spacing\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Height\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Insulation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Type\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 R-Value\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Chimneys**

Type\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# of Flues\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Interior/Exterior\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Height Above Roof\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Stairs**

Stair Width\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tread Depth\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Riser Height\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Closed/Open Riser\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Railing Height\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Electric**

Service Size\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Smoke/CO detectors\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Location\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Roof System**

Trusses\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Snow load\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Design\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rafters\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Species\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Size\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Span\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spacing\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Ridge\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pitch\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sheathing\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Covering\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Insulation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Type\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 R-value\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Plumbing**

Water Supply Pipes\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Type\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Size\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Drain Pipes\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Type\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Size\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vent Pipes\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Type\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Size\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Other**

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

**Building Permit Information**

1. No person, firm or corporation shall commence the erection, construction, enlargement, alteration, removal, improvement, movement, demolition, conversion or change in the nature of occupancy of any building or structure; or install plumbing or heating equipment; or cause the same to be done, without first having applied for and obtained a permit from the Code Enforcement Official of the Town.
2. A permit shall Not be required for:
	1. One story detached structures associated with one- or two-family dwellings or multiple single-family dwellings (townhouses) which are used for tool and storage sheds, playhouses, or similar uses, provided the gross floor area does not exceed 144 square feet.
	2. The installation of swings and other playground equipment associated with a one- or two-family dwelling or multiple single-family dwellings (townhouses).
	3. The installation of a swimming pool associated with a one- or two-family dwelling or multiple single-family dwellings (townhouses) where such pools are designed for a water depth of less than 24 inches and are installed entirely above ground.
	4. The installation of fences that are 6 feet and under, which are not part of an enclosure surrounding a swimming pool.
	5. The construction of retaining walls unless such walls support a surcharge or impound Class I, II, IIA liquids.
	6. The construction of temporary motion picture, television and theater stage sets and scenery.
	7. The installation of window awnings supported by an exterior wall of a one- or two-family dwelling or multiple single-family dwellings (townhouses).
	8. The installation of partitions or movable cases less than 5’9” in height.
	9. Painting, wallpapering, tiling, carpeting, or other similar finish work.
	10. The installation of listed PORTABLE electrical, plumbing, heating, ventilation or cooling equipment or appliances.
	11. The replacement of any equipment provided the replacement does not alter the equipment’s listing or rent=der it inconsistent with the equipment’s original specifications.
	12. Ordinary repairs, provided that such repairs DO NOT involve:
		1. The removal or cutting away of a load bearing wall, partition, or portion thereof, or of any structural beam or load bearing component.
		2. The removal or change of any required means of egress, or the rearrangement or parts of a structure in a manner which effects egress.
		3. The enlargement, alteration, replacement, or relocation of any building system.
		4. The removal from service of all or part of a fire protection system for any period of time.
3. Amendments to the application or the plans and specifications accompanying the same may be filed at any time prior to the completion of the work, subject to the approval of the Code Enforcement Official.

However, any construction or repair work not requiring a building permit must nevertheless be done in

conformance with the New York State Uniform Fire Prevention and Building Code 19NYCRR, and any

and all other state and local statures.

1. A building permit shall be effective to authorize the commencing of work in accordance with the application, plans and specifications on which it is based, from the date of the permit issuance, for the period stated from the Fees Schedule for that type of work. For good cause, the Code Enforcement Official may allow a maximum of three (3) extensions for periods not exceeding twelve (12) months each to complete work on the project. All work shall conform to the approved application, plans and specifications. Work shall be substantially completed twelve (12) months after the start of the project.
2. The Code Enforcement Official may revoke a permit where he finds:
	1. There has been any false statement or misrepresentations made as to a material fact in the application, plans or specifications.
	2. The permit was issued in error and should not have been issued in accordance with the applicable law.
	3. That the work is not being performed in accordance with the provisions of the applications, plans or specifications.
	4. The person to whom a permit has been issued fails or refuses to comply with a Stop Work Order.
3. The Code Enforcement Official may issue a Stop Work Order whenever he has reasonable grounds to believe that such work is being performed in an unsafe and dangerous manner, or for any of the reasons stated in #5, or any other legally applicable reason.
4. The Code Enforcement Official and/or his agents may, upon the showing of proper credentials and in the discharge of his duties, enter the property, structure, or premises for the purpose of inspection as provided in the Code or for the purpose of inspection as provided in the Code or for the investigation of a complaint.
5. A Certificate of Occupancy is required upon completion of new home construction.
6. A Certificate of Compliance may be required depending upon the nature of the project. The Code Enforcement Official will make such a determination and may require certain tests in order to furnish said proof compliance or occupancy.

**Responsibility for obtaining a building permit, any required inspections and any necessary certificates upon completion shall be that of the owner of record.**

**APPLICANT CERTIFICATION**

***As owner or authorized representative of the building, structure, or land to which this permit applies, I agree to save the Town of Elizabethtown harmless from any and all damages, judgments, costs or expenses which said Town may incur or suffer by reason of the granting of this permit. I acknowledge that nothing contained herein, including the application and any approval herein granted for a project, shall be construed as an assertion of compliance with any requirements of the provisions of the Adirondack Park Agency Act, or the Department of Health, or the Department of Environmental Conservation, or the State of New York Rules and Regulations. The Town of Elizabethtown makes no representation pertaining to the applicant’s compliance with any governmental laws, rules, or regulations other than the building code of the Town of Elizabethtown and assumes no obligation for notification and coordination in connection therewith. The Town of Elizabethtown also makes no representation as to the existence of any other public right or the private rights of an individual or corporation with respect to a project.***

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 ***OWNERS Signature Above & Printed:***

***\*If the owner’s signature is not present above, a signed authorization must accompany this application.***

***Applicant, if different than owner:***

***I hereby certify that the information contained in this application is correct and that I am aware of the requirements of New York State Unform Fire Protection and Building Code and the Building and Panning/Zoning Use codes of the Town of Elizabethtown.***

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 ***APPLICANT Signature Above & Printed: Below:***

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