



**TOWN AND VILLAGE OF ELLICOTTVILLE  
BUILDING / CODE ENFORCEMENT DIVISION  
17 MILL ST.  
ELLICOTTVILLE, NY 14731**



**PHONE: (716) 699-4773**

**FAX: (716) 699-9005**

**APPLICATION FOR BUILDING PERMIT**

*This application is for permission to construct the following in compliance with the NYS Building code and Town/ Village of Ellicottville's Zoning Law and Permit Fee Schedule*

Date: \_\_\_\_\_

Site Address: \_\_\_\_\_

Town       Village

Tax Map #: \_\_\_\_\_

**Permit #** \_\_\_\_\_

**APPLICANT INFORMATION:**

Is the applicant the property owner?       YES       NO

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**CONTRACTOR INFORMATION:**

Company Name: \_\_\_\_\_

Same as Owner

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Wages are being paid for performance of work:       Yes       No

Worker's Compensation Ins. Provider: \_\_\_\_\_

Policy #: \_\_\_\_\_

Certificate #: \_\_\_\_\_

Copy attached, only the following forms will be accepted. (C-105.2, U-26.3, SI-12, GSI-105.2, CE-200, BP-1) **No Accord forms.**

Electrician: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Plumber: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

**ARCHITECT / DESIGNER / ENGINEER INFORMATION**

Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Cell: \_\_\_\_\_

E-Mail: \_\_\_\_\_

NYS       PE       RA # \_\_\_\_\_

**DESCRIPTION OF WORK:** (including all structural changes)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Attach any additional information

Zoning District of Proposed Construction: \_\_\_\_\_

Size of Lot: \_\_\_\_\_ Site Survey Plan Attached:  YES  NO

Floor Area to be Constructed or Altered: \_\_\_\_\_ Total Sq. Feet

Estimated Cost of Proposed Construction: \_\_\_\_\_

Existing Building Use: \_\_\_\_\_

Proposed Use: \_\_\_\_\_

Flood Plain: Site  is  is not within a flood plain.

Water Supply:  Municipal Water (Tap fee)  New Well  Existing Well

Wastewater:  Municipal sewer (Tap fee)  Septic System (attach permit from Catt. Co. Health Dept.)

Any modification to Water or Sewer connection not in Description of work shall require additional permit.

Building Permit expires 1 year from issuing date. Permitted work shall remain accessible and exposed until inspected. It is the Owner/Contractor's responsibility to notify the Ellicottville Code Enforcement Officer of all required inspections listed on the building permit 48 hours before they are enclosed, failure to do so shall require removal of finished surface at Owner's/Contractor's expense. Permission to use or occupy a building or structure, or portion thereof, for which a building permit was previously issued shall be granted only by issuance of a Certificate of Occupancy or a Certificate of Compliance.

The undersigned General contractor and Property Owner both hereby acknowledge that the proposed construction on the above referenced property will require accessing the property from an existing Town/Village Highway, that proper care must be taken to avoid damage to that Town/Village Highway, particularly when loading and unloading heavy equipment and delivering supplies, and that they assume full responsibility and financial liability for any damage to the Town/Village Highway caused by negligent or careless use of that government property by themselves or their contractors and sub-contractors. The undersigned further acknowledge the requirement to obtain a driveway cut permit before beginning any work in the Town/Village right of way.

**Owner and Contractor Certification** Permit fee is non-refundable. Additional Fees may be charged per rate schedule.

I hereby certify that I have examined this application and know the same to be true and correct. All provisions of laws and ordinances covering this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction, land use or the performance of construction. I understand it is against the law to exceed the scope of a building permit. Permit fee is non-refundable. I swear that this application is a true and complete statement of all proposed work on the described premises, that I have in effect all required insurance, including workers compensation insurance. This permit issuance expressly implies approval by the Property owner of inspections required of the premises.

Property Owner's Name: (Print) \_\_\_\_\_

Property Owner's Signature: \_\_\_\_\_

Contractor's Name: (Print) \_\_\_\_\_

Contractor's Signature: \_\_\_\_\_

OFFICE USE ONLY

Fee \$ \_\_\_\_\_ Date Received: \_\_\_\_\_

Planning Board Review:  NO  YES      Approved: \_\_\_\_\_ Denied: \_\_\_\_\_

Zoning Board of Appeals:  NO  YES      Approved: \_\_\_\_\_ Denied: \_\_\_\_\_

Zoning: \_\_\_\_\_

Special Conditions of Permit:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Floor area to be constructed or altered \_\_\_\_\_ Square feet.

Living space \_\_\_\_\_ Garage \_\_\_\_\_ Deck(s) \_\_\_\_\_

Permit # \_\_\_\_\_

Permit Granted on \_\_\_\_\_ By \_\_\_\_\_  
(Date) (Code Enforcement Officer)