

TOWN OF HILLSDALE NEW YORK
BUILDING PERMIT APPLICATION

TAX MAP #

Expiration Date: _____

Permit # _____

Permit fee _____

1. LOCATION:

House No. _____ Road Name _____

Subdivision Name & Lot No. (if any) _____

2. PROPERTY OWNER _____ **PHONE** _____

CURRENT ADDRESS _____

CITY & STATE _____ **ZIP** _____

3. CONTRACT OR BUILDER _____ **PHONE** _____

CURRENT ADDRESS _____

CITY & STATE _____ **ZIP** _____

4. ZONING DISTRICT R - RUAL RESIDENTIAL HB - HIGHWAY BUSSINESS HM - HAMELTMIXED USE
 RIDGELINE - STEP SLOPE OVERLAY SC - STREAM CORRIDOR OVERLAY

5. EXISTING USE & OCCUPANCY: _____

6. INTENDED USE & OCCUPANCY: _____

7. NATURE OF WORK: NEW BUILDING ADDITION ALTERATION DECK SHED SWIMMING POOL
 DEMOLITION ROOFING OTHER _____

8. ADDITIONAL DESCRIPTION _____

9. WILL THIS PROPOSAL: (Please answer yes or no to each question)

a. Involve new, or alterations to, electrical wiring? _____

b. Involve new, or alterations to, or additional use of, a sewage disposal system? _____

c. Require installation, or changes in location, of a driveway? _____

d. Involve a change in use or occupancy? _____

10. SIZE OF BUILDING - NUMBER OF STORIES _____ **DEPTH** _____ **WIDTH** _____ **HEIGHT** _____

11. LOT DIMENSIONS _____ **WIDTH** _____ **DEPTH** _____

12. ESTIMATED COST \$ _____

over

REAR YARD

Large grid area for sketching and setbacks.

FRONT YARD

12. SET BACKS - LEFT YARD _____ RIGHT YARD _____ REAR YARD _____ FRONT YARD _____

13. Please sketch and locate structure or object within grid showing front, back and side setbacks.

14. APPLICATION IS HEREBY MADE to the Building Department for the issuance of a Building Permit pursuant to the New York State Uniform Fire Prevention and Building Code (Title 9 NYCRR) for the construction of buildings, additions or alterations, or for removal or demolition as herein described. The applicant agrees to comply with all applicable laws, ordinances and regulations, including New York State Energy Code requirements, and the Town of Hillsdale Zoning Ordinance.

Signature of Applicant _____ Date _____

Approved YES NO By _____ Date _____ Title _____

Permit Fee \$ _____ + C/O C/C Fee \$ _____ = Total Fee \$ _____ Check# _____

ZONING PERMIT

THIS IS TO CERTIFY THAT THE PROPOSED STRUCTURE IS IN COMPLIANCE WITH THE ZONING ORINANCE AND THE BUILDING CODE OF THE STATE OF NEW YORK AND THE TOWN OF HILLSDALE, NY
DATE _____ DISRICT _____ SIGNED _____
Zoning Enforcement officer
REFERRED TO PLANNING BOARD _____ REFERRED TO ZONING BOARD _____