

**Town of Macedon**  
**32 Main Street**  
**Macedon, NY 14502**  
**Tel. (315) 986-5932 – Fax (315) 986-4172**

**Building Permit Application**

REQUIREMENTS:

- A. Please complete entire application and submit to the Building Inspector for approval.
- B. Application is hereby made for a building permit in conformity with zoning ordinance of the Town of Macedon, the New York State Uniform Fire Prevention and Building Code and any amendments thereto.
- C. A complete set of accurately dimensioned building plans complete with the energy code and roof truss certifications stamped by an architect or licensed engineer shall accompany this application.
- D. No work shall commence before the building permit is issued. No building shall be occupied in whole or in part until the Building Department has issued a Certificate of Occupancy.
- E. Contractor must provide proof of General Liability, Workers' Compensation/Liability and NYS Disability insurance.

Date: \_\_\_\_\_ Zone: \_\_\_\_\_ Permit #: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_ Tax ID #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Property Owner: \_\_\_\_\_ Lot Size(acres): \_\_\_\_\_

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

Builder: \_\_\_\_\_ Phone #: \_\_\_\_\_

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

Location of Project: \_\_\_\_\_

GENERAL DESCRIPTION OF WORK/INTENDED USE: \_\_\_\_\_

\_\_\_\_\_

PERMIT TYPE:

Residential: Single family \_\_\_\_\_ Duplex \_\_\_\_\_ Multi-family (3+units) \_\_\_\_\_ In-law \_\_\_\_\_

Commercial: \_\_\_\_\_ Industrial: \_\_\_\_\_ Other (describe): \_\_\_\_\_

NATURE OF WORK:

New construction \_\_\_\_\_ Addition \_\_\_\_\_ Remodel \_\_\_\_\_ Accessory structure \_\_\_\_\_

Change of use \_\_\_\_\_ Other (describe) \_\_\_\_\_

WORK SPECIFICATIONS:

Residential Primary Structure: Number of units \_\_\_\_\_ Width \_\_\_\_\_ Depth \_\_\_\_\_

Total height \_\_\_\_\_ No. of stories \_\_\_\_\_ Bedrooms \_\_\_\_\_ Bathrooms \_\_\_\_\_

Sq. ft. of living area \_\_\_\_\_ Sq. ft. garage \_\_\_\_\_

Renovation/alteration (describe work) \_\_\_\_\_

Will roof or floor trusses be used? Roof: Yes/No Floor: Yes/No (please circle)

Will attic/basement be finished or used as living space? Attic: Yes/No Bsmt: Yes/No

Residential Accessory Structure:

Pole Barn: Width \_\_\_\_\_ Depth \_\_\_\_\_ Height \_\_\_\_\_

Detached Garage: Width \_\_\_\_\_ Depth \_\_\_\_\_ Height \_\_\_\_\_

Shed: Width \_\_\_\_\_ Depth \_\_\_\_\_ Height \_\_\_\_\_

Fence: Height \_\_\_\_\_ Length \_\_\_\_\_ Type/Style \_\_\_\_\_

Deck: Overall Dimensions: \_\_\_\_\_ X \_\_\_\_\_ Sq. ft. \_\_\_\_\_

Pool: Above-ground \_\_\_\_\_ In-ground \_\_\_\_\_ Dimensions \_\_\_\_\_  
Hot tub \_\_\_\_\_ Gallons \_\_\_\_\_

Woodstove/furnace/fireplace: \_\_\_\_\_ Other: \_\_\_\_\_

MANUFACTURED HOME INSTALLATION:

Park Name: \_\_\_\_\_ Lot No.: \_\_\_\_\_

Year of Unit: \_\_\_\_\_ Make/Model: \_\_\_\_\_

Length \_\_\_\_\_ Width \_\_\_\_\_ Bedrooms \_\_\_\_\_ Bathrooms \_\_\_\_\_

(Provide proposed lot layout with distances to adjacent units, plus letter of permission from park owner.)

COMMERCIAL/INDUSTRIAL:

Total square footage \_\_\_\_\_ Width \_\_\_\_\_ Length \_\_\_\_\_ Height \_\_\_\_\_

Construction type (circle one): 1A 1B 2A 2B 3A 3B 4A 4B 5A 5B

Sprinkler system proposed? Yes/No Will trusses be used? Roof: Yes/No Floor: Yes/No

Provide detailed breakdown of uses within the building:

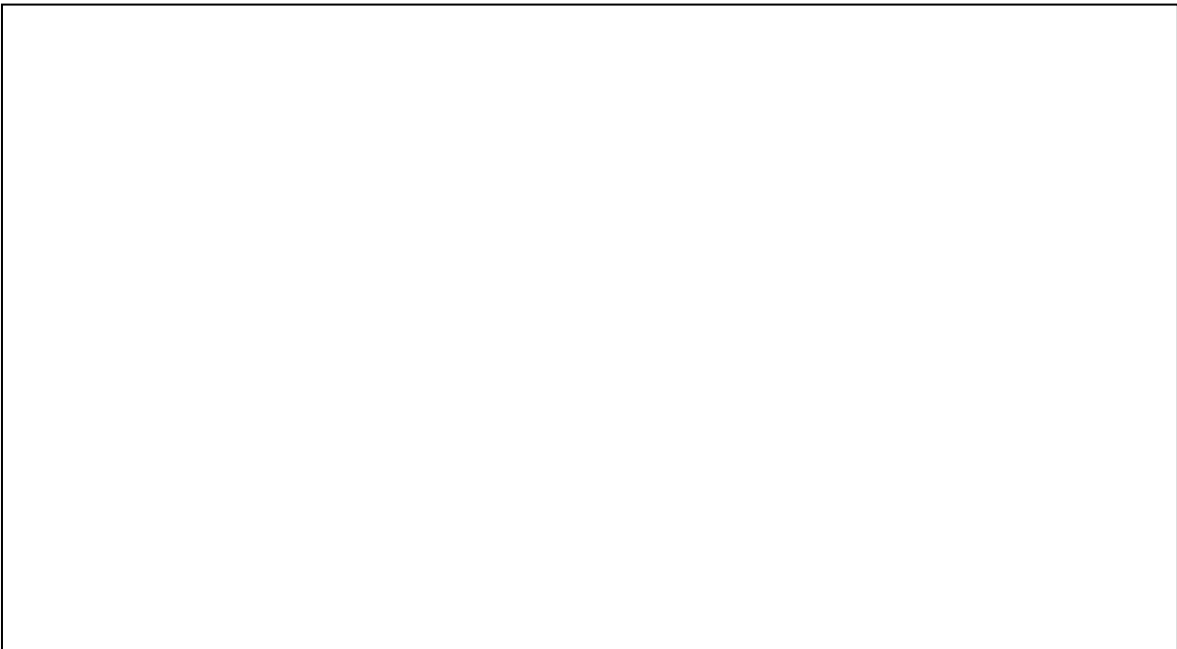
<u>Description of Use</u>	<u>NYS Bldg. Code Use Group</u>	<u>Square Footage</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

ADDITIONAL INFORMATION:

Special Use Permit Required/In Effect: No \_\_\_\_\_ Yes \_\_\_\_\_ Permit No. \_\_\_\_\_

Zoning Variance Required/Granted: No \_\_\_\_\_ Yes \_\_\_\_\_ Date Granted \_\_\_\_\_

Please draw a rough sketch of existing structures and property setbacks on all sides, or provide a separate plot plan.



The undersigned represents and agrees as a condition of this permit that the structure will be constructed in accordance with the zoning ordinance and all other applicable laws of the Town of Macedon, the New York State Uniform Fire Prevention and Building Code and the plans annexed hereto, and grants the Town of Macedon Building Department the right to make all required inspections.

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**THIS PERMIT SHALL EXPIRE 1 YEAR FROM THE DATE OF ISSUE.**

AS PER RESOLUTION NO. 18 (92) DEVELOPER CHARGES THE TOWN BOARD RESOLVED THAT ANY ASSOCIATED CHARGES SHALL BE CHARGED BACK TO THE DEVELOPER.

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SIGNATURE OWNER / BUILDER / APPLICANT

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DATE

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BUILDING/ZONING OFFICER

---

DATE

**PERMIT FEES**

PERMIT: \_\_\_\_\_

ESCROW: \_\_\_\_\_

RECREATION: \_\_\_\_\_

WATER: \_\_\_\_\_

SEWER: \_\_\_\_\_

OTHER: \_\_\_\_\_

TOTAL: \_\_\_\_\_

Ins. Cert./Waiver on File: \_\_\_\_\_