



BUILDING AND ZONING PERMIT APPLICATION

Town of Schodack

Building Department
Town Hall 3rd Floor, 265 Schuurman Rd.
Castleton, NY 12033

Town Supervisor
David B. Harris

Phone (518) 477-7940
Fax (518) 477-7983
www.schodack.org

Permit No. _____

APPLICATION IS HEREBY MADE to the Building Department for the issuance of a Building and Zoning Permit pursuant to the N.Y.S. Uniform Fire Prevention and Building Code for the construction of buildings, additions or alterations, or for removal or demolition, as herein described. The applicant or owner agrees to comply with all applicable laws, ordinances, regulations and all conditions expressed on this application which are part of these requirements, and also will allow inspectors to enter the premises for the required inspections.

APPROVED / DENIED
OFFICE USE ONLY

ADDRESS OF SUBJECT PROPERTY

Number Street City State Zip

Tax Map No. (Required - This can be found on your Tax Bill) _____

Zoning District _____ Lot Size _____ Occupancy Classification _____ Commercial Residential

Specify Work To Be Done _____

Existing Use _____ Intended Use _____

Estimated Cost of Construction _____ Floor Area of Construction (Sq. Ft.) _____

Applicants

Name _____ E-Mail _____

Address _____
Number Street City State Zip

Phone (Home) _____ (Cell) _____ (Fax) _____

Property Owner(s) Name _____ Phone _____

Address _____
Number Street City State Zip

General Contractor _____

Address _____
Number Street City State Zip

Phone (Work) _____ (Cell) _____ (Fax) _____

THE GENERAL CONTRACTORS CURRENT CERTIFICATE OF WORKERS COMPENSATION (form C-105.2, U26.3 or CE-200) AND GENERAL LIABILITY INSURANCE (ACCORD Form) ARE REQUIRED TO BE ON FILE (Town of Schodack must be certificate holder) WITH THIS OFFICE PRIOR TO ISSUANCE OF A BUILDING PERMIT

IF WORK IS DONE BY THE HOME OWNER, THIS OFFICE REQUIRES A COPY OF THE DECLARATION PAGE FROM THE HOME OWNERS INSURANCE POLICY

OFFICE USE ONLY	
Fee Amount \$ _____	Date Paid / Check Number _____
Application of _____	Dated _____
Is hereby Approved <input type="checkbox"/>	Denied <input type="checkbox"/>
Reason for DENIAL of permit _____	
Proposed Use _____	
Date _____	Code Enforcement Official _____

THIS PERMIT EXPIRES ONE (1) YEAR FROM DATE ISSUED

INSTRUCTIONS

1. This application must be completed legibly in ink and submitted to the Town of Schodack Building Department.
2. This application must be accompanied by:
 - A) Two (2) sets of sealed plans and specifications, no reverse, no options, showing proposed construction. Plans and specification shall describe the nature of the work to be performed, the materials and equipment to be used and installed and details of structural, mechanical and plumbing and heating installations.
 - B) Plot plans showing location of lot, relationship to adjoining premises or public streets or areas, setbacks, septic, well, driveway, fences, access, building(s) as well as proposed location of the new structure.
 - C) Insurance Certificate as well as Proof of Workers Compensation.
 - D) Foundation plan to fit land that house is being built upon.
 - E) Planning Board approval (if applicable).
 - F) Culvert Permit showing location of driveway (if applicable).
 - G) Sealed Energy Study such as COMcheck or REScheck.
 - H) Health Department permit to construct (if applicable).
 - I) Solid Fuel Burning Permit (if applicable).
 - J) E-911 Mailing Address Application filled out completely (if applicable).
3. The work covered by this application SHALL NOT commence before the issuance of a Building and Zoning Permit.
4. Upon approval of this application, the Building Department will issue a Building and Zoning Permit to the applicant, together with an approved set of plans and specifications. Such permit and approved plans and specifications shall be kept on the premises and be available for inspection throughout the progress of the work.
5. Any deviation from the approved plans must be authorized by the approval of revised plans subject to the same procedure established for the examination of the original plans. An additional permit fee may be predicated on the extent of the variation from the original plans.
6. Costs for the work described in the Application for Building and Zoning Permit include the cost of all construction, and other work done in connection therewith, exclusive of the cost of the land.

INSPECTION SCHEDULE

All Inspections Require 24 Hours Notice

You must call the Town of Schodack Building Department (518) 477-7940 for the following required inspections. Any work covered or concealed before inspection and approval shall be exposed for inspection at the applicants expense.

1. **Footing Inspection** before pouring concrete (ALL FOOTINGS SHALL BE FORMED).
2. **Foundation Wall Inspection** before pouring concrete.
3. **Foundation Inspection** of Walls and Footing Drains before Backfill.
4. **Submit Surveyor's Foundation Location** of the structure to the Building Department before framing is started or modular set.
5. **Framing, plumbing, heating, and electrical inspection** before any closing of the framework. Electrical inspections are done by any one of the following approved Electrical Inspectors:
 - A) Commonwealth Electrical Inspectors (518) 766-5547
 - B) Middle Department Inspection Agency (518) 273-0861
 - C) The Inspector (518) 363-0181
 - D) New York Atlantic-Inland, Inc. (607) 753-7118
6. **Chimney, Fireplace, Woodstove Inspection** (if applicable)
7. **Insulation Inspection**
8. When all work is completed, a **Final Inspection** of the site, building and all utilities as well as Rensselaer County Department of Health Certificate of Compliance is required.

NO OCCUPANCY OF A BUILDING OR PART THERE OF IS PERMITTED WITHOUT A CERTIFICATE OF OCCUPANCY ISSUED BY THE BUILDING DEPARTMENT

TO WHOM IT MAY CONCERN:

Please be informed that in reviewing building plans, all information is taken from the plans. Any changes, after the plans have been accepted, must be reviewed by the Building Inspector. This Department shall expect, upon completion, to find the structure as the plans show. Absolutely no one is to occupy this building without first obtaining a Certificate of Occupancy.

Date _____

(Owner)

(Builder)

In addition, under Town Code 90-4 (J), the Building Inspector has the right to revoke the permit if construction is not prosecuted in accordance with the application and applicable law.