RESIDENTIAL GARAGE APPLICATION

Dear Applicant:

Attached is a Lewis County Building Permit Application and Fee Schedule. This application is for use only in communities where the County of Lewis is responsible for enforcement of the Building Codes of New York State. The permit applied for with this form applies only to the Building Codes of New York State and has no bearing on the other local, State, or Federal regulations, such as zoning or floodplain ordinance, etc.

The permit fee must be submitted to the Lewis County Building & Codes Office with the completed application. Please make all checks payable to the Lewis County Clerk and mail to the Lewis County Building & Codes Department, 7660 North State Street, Lowville, New York 13367.

The approved permit and all correspondence will be mailed to the owner at the address indicated on the application.

It is the responsibility of the owner to see that the Lewis County Code Enforcement Officer is notified when the project will be ready for the next inspection.

If you have any questions, please contact the Lewis County Building & Codes Office at (315) 376-5377.

Sincerely,

Ward Dailey
Senior Code Enforcement Officer

Attachment
Permit Number

Residential Garage Application

Date ________________________________ Census Code ________________________________

Tax Map # _____________________________

Construction Start Up Date ____________________________ Application Fee $ ______________

Property Owner’s Name ____________________________ Phone ____________________________

Mailing address ________________________________________

_____________________________________________________

Contractor Name ____________________________ Phone ____________________________

Mailing address ________________________________________

Project Address (911 address) ____________________________ Town ____________________________

Description of Project __________________________________

Total Square Footage of New Building/Structure ____________________________

Total Square Footage of Addition to Existing Building ____________________________

Is the project site in a Flood Zone (Yes or No) Value of Work (materials & labor) - $ ______________

º Driveways may be subject to regulation, applicant is responsible to contact entity that controls Right of Way prior to installation.

To apply for a Building Permit, you MUST provide this Application filled out, a check payable to the Lewis County Clerk for the application fee, One (1) copy of a Plot Plan, Two (2) copies of a Building Plan, or Floor Plan, and an approved Zoning / Land Use Permit where required by your town.

Residential Fee Schedule

If the total square footage of your structure falls within a bracket, that bracket shall be used to determine the total fee. Note: Only non-habitable single story structures with a 6’ separation (up to 144 sq. ft.) will require no fee. Any of greater dimension, the entire footage is utilized for calculating fee.

For Brackets A-D $35.00 base - Plus Bracket

Bracket (A) from 145 to 2000 sq. ft. = 15¢ per sq. ft. Bracket (B) from 2001 to 3500 sq. ft. = 15¢ per sq. ft.
Bracket (C) from 3501 to 4500 sq. ft. = 20¢ per sq. ft. Bracket (D) over 4500 sq. ft. = 30¢ per sq. ft.
Bracket (E) ATTACHED residential garages, residential additions, storage buildings, decks, and porches up to 144 sq. ft. $25.00

Residential Alterations

Up to $5,000 $ 40.00
For each $3,000 over the first $5,000 $ 5.00
Residential Garage

TYPE OF SOIL:
(Circle)  Sand  Gravel  Clay  Other

TYPE OF FOUNDATION:
(Circle)  Monolithic  Frost Protected  ICF  CMU  Poured
Bldg. Length: ___________
Bldg. Width: ___________

Footer Dimension ______________________
Slab Thickness _________________________
Anchor Size Spacing ____________________
Sill Plate Dimension ____________________
Stud Size ___________ Spacing ___________
Sheathing ______________
Brace __________________

Rafters:
Size ___________ Spacing ___________ Span ___________

Trusses:
Spacing ________________ High Wind Fasteners __________

Roof Decking _______________________
Under-layment _______________________
Roof Covering - Metal  Shingles  Other  (circle)
Headers _____________
Beams _______________ Columns ____________
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 obligation 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 that 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 for 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 homeowners’ insurance policy that is currently in effect and covers the property listed on the attached building permit AND am hiring or paying individuals a total of less than forty (40) hours per week (aggregate hours for all paid individuals on the jobsite) for which the building permit was issued.

I also agree to either:

- [ ] acquire appropriate workers’ compensation coverage and provide appropriate proof of that 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 of pay individuals a total of forty (40) hours or more per week (aggregate hours for all paid individuals on the jobsite) for work indicated on the building permit, or if appropriate, file a WC/Db-100 exemption form; OR
- [ ] 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 if the project takes a total of forty (40) hours or more per week (aggregate hours for all paid individuals on the jobsite) for work indicated on the building permit.

__________________________________________  __________________________
(Signature of Homeowner)                     (Date Signed)

__________________________________________
(Homeowner’s Name Printed)

Home Telephone Number: ______________________

Property Address that requires the building permit:
__________________________________________
__________________________________________
__________________________________________
__________________________________________

Sworn to before me this ________ day of ______________, ________.

__________________________________________
(County Clerk of Notary Public)

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

**BP-1 (9-07)**

NY-WCB
STATEMENT OF ENVIRONMENTAL CONCERN
(HOMEOWNER)

This Statement confirms that I have read and been made aware that the New York State Department of Environmental Conservation requires a State Pollution Discharge Elimination System Permit (S.P.D.E.S.) for disturbance of property greater than one (1) acre; this is to include the driveways, location of house and all outbuildings and pools.

For more information, you are strongly urged to contact the D.E.C Bureau of Water Permits at (518) 402-8111 or online at www.dec.ny.gov

State imposed fines for a violation of this law can be a substantial $37,500 per day. If in doubt, call New York State Department of Environmental Conservation.

_________________________  _________________________
Signature of Homeowner      Date Signed
_________________________
Homeowners Name Printed

THIS PERMIT COVERS ONLY THE WORK DESCRIBED IN THIS APPLICATION.

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING 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 OR THE PERFORMANCE OF CONSTRUCTION.

Signature of Applicant or Authorized Agent____________________________ Date __________________

FOR ENFORCEMENT OFFICERS USE ONLY

_________________________
Approved Zoning Permit Required – YES / NO / NA  Type Of Construction __________________

I, the undersigned, Code Enforcement Officer of the County of Lewis, hereby (approve) (deny) the within application for a building permit.

_________________________  __________________________
Date                      Code Enforcement Officer

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Use the space below or attach a separate sheet to show the location of the proposed building(s) in relation to all roads public or private, distance proposed building is from all bodies of water, the location of all wells and septic systems, existing and proposed, the distance between buildings and give the road name as well as the names of all adjacent landowners. Also show the lot width and depth, and show the distance of proposed building(s) to all property lines.

NOTE: GIVE THE DISTANCE OF ALL WELL AND SEPTIC SYSTEMS ON NEIGHBORING PROPERTIES TO YOUR PROPOSED WELL/SEPTIC IF CLOSER THAN 150FT.

PLOT DIAGRAM

NAME OF ADJACENT LAND OWNER

OWNERS NAME LEFT SIDE

OWNERS NAME RIGHT SIDE

LOT DEPTH

REAR LOT WIDTH

FRONT LOT WIDTH

ROAD NAME

THIS AREA REPRESENTS THE ROAD IN FRONT OF YOUR PROJECT, SHOW DRIVEWAY.