



OFFICE OF LEWIS COUNTY CODE ENFORCEMENT

7660 North State Street
Lowville, New York 13367
Telephone: (315) 376-5377
Fax: (315) 377-3137

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,

A handwritten signature in black ink that reads "Ward Dailey". The signature is written in a cursive, slightly slanted style.

Ward Dailey
Senior Code Enforcement Officer

Attachment

LEWIS COUNTY BUILDING & CODES DEPARTMENT
LEWIS COUNTY COURT HOUSE
7660 N. STATE ST.
LOWVILLE, NEW YORK 13367
Phone: (315) 376-5377 Fax: (315) 377-3137

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) - \$** _____

° 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**

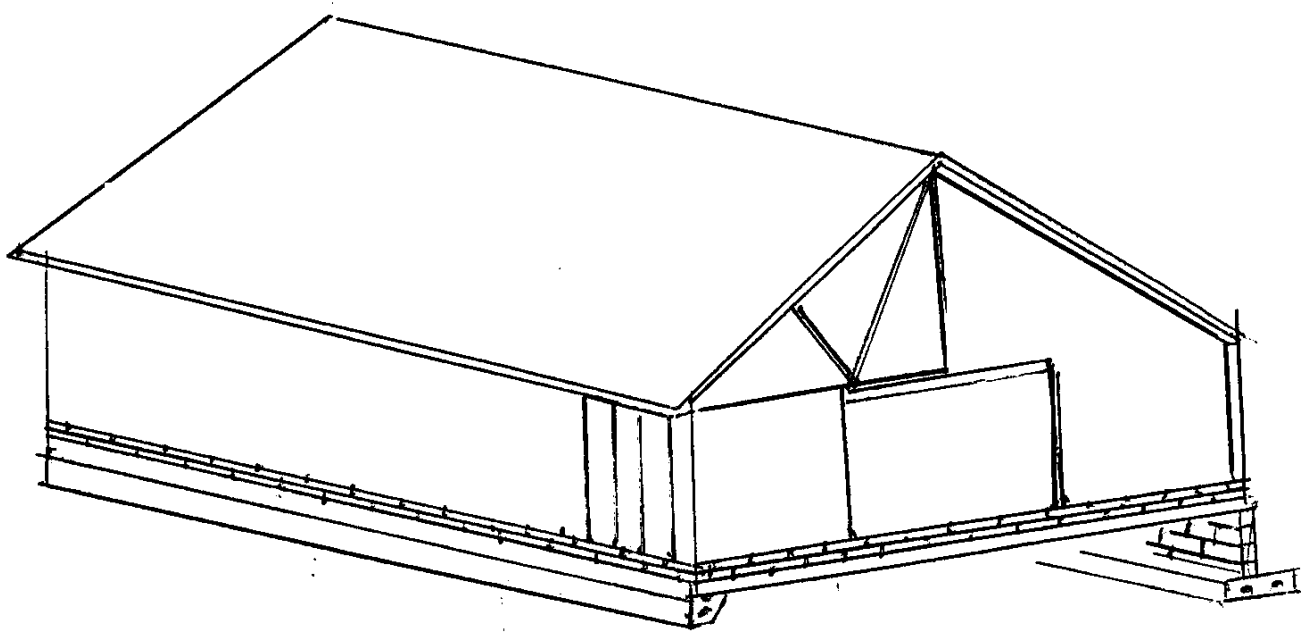
One or two family dwellings, camps, additions, decks, mobile & modular homes and residential garages and residential storage buildings.

- | | |
|---|---|
| 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

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 _____

Bldg. Length: _____

Bldg. Width: _____

*** Structures over 1500 Sq. Ft. will
require engineers design**

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 or 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)

**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 _____

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

