



BUILDING AND CODES  
P: 315-376-5377 | F: 315-377-3137

7660 North State Street  
Lowville, NY 13367  
lewiscounty.org

## **BUILDING PERMIT APPLICATION** **RESIDENTIAL ALTERATIONS**

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 style with a large, looped "D" at the end.

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 \_\_\_\_\_

### Building Permit Application Residential Alterations

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 \_\_\_\_\_

Value of Work (materials & labor) - \$ \_\_\_\_\_

To apply for a Building Permit, you MUST provide a completed application and a check payable to the Lewis County Clerk for the application fee, two (2) copies of a Building Plan, or Floor Plan, and an approved Zoning / Land Use Permit where required by your town.

#### FEE SCHEDULE

**PROJECT VALUE**

Up to \$5,000  
For each \$3,000 over the first \$5,000

**FEE**

\$ 40.00  
\$ 5.00

**SCOPE OF WORK**

Structural:

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Electrical:

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Plumbing:

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Mechanical:

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Additional Project Details:

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**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)

Home Telephone Number: \_\_\_\_\_

\_\_\_\_\_  
(Homeowner's Name Printed)

Property Address that requires the building permit:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**STATEMENT OF WORKERS' COMPENSATION  
(CONTRACTOR)**

As the contractor of record for this permit application, I understand that I am responsible for proof of Workers' Compensation or proof of Exemption from Workers' Compensation. I agree I will provide proof of Workers' Compensation or proof of Exemption to the Lewis County Building and Codes Office. I understand that the proof will be filed for a period of one (1) year.

\_\_\_\_\_  
Signature of Contractor

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Contractors 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 \_\_\_\_\_

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 \_\_\_\_\_