

TOWN OF CROWN POINT

BUILDING / USE PERMIT

PO Box 443, 17 Monitor Bay Road, Crown Point, NY 12928

FOR OFFICE USE ONLY

Application No. _____ Date Received _____ Date Examined _____

Approved Permit No. _____ Fee Received \$ _____

Disapproved Reason: _____

Examined by: _____

JOB LOCATION: Street Address _____

Tax Map Section _____ Block _____ Lot _____

APPLICANT: _____ Owner Lessee Agent
 Architect/Engineer Builder/Contractor

Name _____

Mailing Address _____

Phone No. _____

Name & Address of owner if different than Applicant:

If owner /applicant is a corporation, give name and title of two officers

1. _____ 2. _____

OCCUPANCY: (check appropriate box)

<input type="checkbox"/> One-Family Dwelling	R3	<input type="checkbox"/> Business	_____	Group B
<input type="checkbox"/> Two-Family Dwelling	R3	<input type="checkbox"/> Mercantile	_____	Group M
Multiple Dwelling		<input type="checkbox"/> Industrial	_____	Group F
<input type="checkbox"/> Permanent Occupancy	R2	<input type="checkbox"/> Storage	_____	Group S
<input type="checkbox"/> Transient Occupancy	R1	<input type="checkbox"/> Assembly	_____	Group A
<input type="checkbox"/> Adult Residential Care	R4	<input type="checkbox"/> Institutional	_____	Group I
(not more than 16 occupants)		<input type="checkbox"/> Misc.	_____	Group U

NATURE OF PROPOSED WORK: (check any that apply)

Construction of a new structure
 Addition to existing structure
 Alteration to existing structure
 Other (describe) Change of Occupancy

Estimated Cot (Exclusive of Land)

\$ _____
\$ _____
\$ _____
\$ _____
\$ _____ TOTAL

Engineer, Architect, and/or (Sub) Contractors:

Name: _____	Phase of work: _____	Phone No. _____
Name: _____	Phase of work: _____	Phone No. _____
Name: _____	Phase of work: _____	Phone No. _____
Name: _____	Phase of work: _____	Phone No. _____

If owner built check here

Plot Diagram: Locate all buildings, applicable septic systems, and water supplies (existing and proposed).

Show Street(s) and their names(s) and show set back distances from street(s) / road(s) and adjacent property lines.

APPLICATION is hereby made to the Town of Crown Point Department of Code Enforcement for the insurance of a building or change of use permit pursuant to the provisions of the Building and Fire Codes of New York State. The applicant agrees to comply with all applicable provisions of said law and codes as well as any local, county state or federal laws and/or ordinances: and swears that all statement contained in this application are true to the best of his/her knowledge and beliefs.

IMPORTANT – PLEASE TAKE NOTICE

- **All applications must be accompanied by two (2) sets of plans of the proposed project and specifications of the materials to be used.**

- **Plans submitted must be signed and sealed by an architect or engineer licensed by the State of New York. Exceptions to this requirement are:**
 - **New residential constructions - 1,500 gross sq. ft. or less.**
 - **Alterations costing \$10,000.00 or less, which do not involve structural changes or affect public Safety.**

Applicant's signature _____ Date _____