Town of Canandaigua

NEW MULTIPLE RESIDENTIAL / COMMERCIAL / INDUSTRIAL PERMIT APPLICATION (VACANT LAND)

1.	Subject Property Address:			
	Subject Property Tax Map Number:	Zoning District:		
	Lot Size (in square feet or acres):			
2.	Name and Address of Property Owner :			
	Telephone Number / E-mail Address:			
3.	Name and <u>Address of Applicant</u> if not property owner:			
	Telephone Number / E-mail Address:			
4.	Proposed Use of New Building:			
5.	New Structure Information:			
N	EW STRUCTURES	SQ. FT.		
1.	What is the total sq. ft. of the proposed 1 st floor?			
2.	What is the total sq. ft. of all additional finished (occupied) floors	,		
3.	What is the total sq. ft. of all attached garage(s)?			
4.	What is the sq. ft. of any proposed accessory structure(s)?			
5.	. What is the total square footage of this project?			

6. Earthwork:

Cubic yards (CY) to be excavated: (length (ft) x width (ft) x depth (ft) divided by 27 = CY 7. Development Less than 1,000 Square Feet in Area (§220-99-C): A sketch plan in compliance with requirements of section Town Code §220-66. (see enclosed checklist)

Development <u>Greater than 1,000 Square Feet</u> in Area (§220-64-C-2): See Planning Board application for site plan submission requirements.

Will this structure be built within:

> 100 ft of the bed of a stream carrying water on an average 6 months of the year? Yes No

Yes

No

No

No

(If yes, setback to wetland? ____ ft)

- > 100 ft of a NYS DEC wetland? Yes No
- Close proximity to a federal wetland?
- Steep slopes equal to or greater than 15%? Yes
- A wooded area greater than 5 acres? Yes

Dimensional Description	Applicant to Complete	Development Office Staff to Complete	
	To New Building	Required By Code	Required Variance
Distance from the road right-of-way			
Distance from rear property line			
Distance from right side property line			
Distance from left side property line			
Height of Structure(s) (measured from the average finished grade to highest peak)			
Percentage Building Coverage (calculated by dividing the total square footage of the footprint of all existing and proposed structures by the lot size)			

8. Utility Information:

Water Information:

Public

Private Well

If private well, owner must provide a copy of New York State Certification from well digger before permit can be issued.

Sewer Information:

Public

Private Septic System

If private, wastewater disposal plan is required to be designed by a NYS licensed engineer.

9. Contractor Information:

General Contractor:_____

Address:_____

Telephone / E-mail: _____

Contractor Insurance Certificates Required:

C-105.2 or U-26.3 Worker Compensation and DB-120.1 Disability or CE-200 / BP-1

* Please note that ACORD forms cannot be used for proof of insurance.

* Thank you for your cooperation.

The undersigned represents and agrees as a condition to the issuance of these permits that the development will be accomplished in accordance with the Town Zoning Law, the New York State Uniform Fire Prevention and Building Code, approvals/conditions described on the ZBA / PB decision sheets, and the plans and specifications annexed hereto.

Date: _____

PERMIT CANNOT BE ISSUED WITHOUT PROPERTY OWNER SIGNATURE

Please <u>DO NOT</u> send payment with this application. Payment shall not be made until the fee is determined & the permit is issued.

Flood Zone _____ FEMA Panel #_____ Floodplain Development Permit Required? Yes / No

Within environmentally sensitive, open, deed restricted or conservation easement area? Yes / No

Code Enforcement Officer

Permit Issued Permit Number Fee **Building Permit** Soil Erosion Permit **Recreation Fee Total Permit Cost** (non-refundable)

For Office Use Only

Application requires review by Planning Board and/or Zoning Board of Appeals. Yes No

Reviewed By

Date

Date