

TOWN OF NEWFIELD

TOMPKINS COUNTY, NEW YORK 14867

FEE _____ (18 CENTS SF)

Building Code Enforcement

APPLICATION FOR A BUILDING PERMIT MANUFACTURED OR MOBILE HOME

NAME OF APPLICANT _____ PHONE _____

OWNER OF LAND _____ PHONE _____

ADDRESS OF LAND OWNER _____ E-MAIL _____

IS PROPERTY UNDER LAND CONTRACT _____ YES _____ NO

IS THIS PROJECT FOR SOME ONE OTHER THAN THE PRESENT OWNER _____ Y _____ N

ADDRESS OF PROJECT _____ Tax Map No. _____

(If you have not been issued an address please request one from Charles Mosher at
cwmosher@yahoo.com)

ESTIMATED COST \$ _____ of completed project

ESTIMATED DATE TO BEGIN _____ ESTIMATED COMPLETION DATE _____
(including steps, decks, railings, final grade, re-seeding etc.)

GENERAL CONTRACTOR / BUILDER _____ PHONE _____

SUB-CONTRACTORS AND PHONE _____

WELL DRILLER _____ CERTIFICATION # _____ PHONE _____

RETAILER _____ ADDRESS _____ PHONE _____

SINGLE _____ OR DOUBLE WIDE _____ YEAR _____ MAKE _____

MODEL _____ H.U.D. # _____

SIZE _____ # BEDROOMS _____

INSTALLER _____ CERTIFICATE # _____

NOTE THE INSTALLER IS NOT AUTHORIZED TO ALLOW THE HOME OWNER TO PARTICIPATE IN THE INSTALLATION PROCESS.

THE INSTALLER WARRANTEE LABEL MUST BE IN THE BUILDING PRIOR TO OCCUPANCY

MECHANIC OR INSTALLER CERTIFICATION # _____ (EFFECTIVE JULY 1 2006)

FOR RENOVATION OR REPAIR TO STRUCTURAL COMPONENTS)

ADDITIONS PLANNED _____

Type of construction _____ (ie wood masonry steel etc)

Number of Stories _____

Number of additional Bedrooms _____

Total Sq. Footage _____ ADDITIONS ONLY

Garage _____ attached _____ detached _____ size _____

NOTE: EFFECTIVE JAN/1/2011

ALL CONSTRUCTION ACTIVITY PLANNED IN THE TOWN RIGHT OF WAY MUST HAVE A PERMIT ISSUED BY THE HIGHWAY DEPARTMENT PRIOR TO BEGINNING.

Please contact Kevin Berggren at the Town Barns or 607 564 3616 for an application

Will the disturbance on this property during construction (including removal of trees and ground cover or excavation and installation of drive ways etc.) amount to one acre or more in total ? Yes _____ No _____

If yes please call 327 1849 for further instruction.

SHOW DISTURBANCE ON PLOT PLAN PROVIDED

**REMEMBER TO CALL DIG SAFE NY BEFORE YOU DIG 1 800 962 7962
ITEMS REQUIRED TO BE INCLUDED**

**PLANS FOR FOUNDATION OR SUPPORT SYSTEM INCLUDING ANCHORS AND TIE DOWNS _____
MANUFACTURES INSTALLATION MANUAL FOR HOME _____ ANCHORS _____
PLOT PLAN _____** A plot plan must be submitted with all applications. and must include the following:
LOCATIONS OF ALL EXISTING AND PROPOSED BUILDINGS WITH DIMENSIONS OF THE LOT
PLEASE SHOW THE DISTANCE FROM EACH OTHER
PLEASE SHOW THE DISTANCE FROM THE LOT LINES.
PLEASE INCLUDE DISTANCE FROM THE ROAD AND THE AMOUNT OF ROAD FRONTAGE, LOCATION AND DIMENSIONS OF DRIVE WAY.
INCLUDE ALL INTENDED EXCAVATION (DIMENSIONS OF FOUNDATION ,TREE REMOVAL, SEPTIC SYSTEM AND GRADING
(PLANS MUST BE REVIEWED PRIOR TO ANY CONSTRUCTION ACTIVITY INCLUDNG EXCAVATION)

**SEPTIC PERMIT _____ TOMPKINS COUNTY HEALTH DEPARTMENT 274 6688
OR CERTIFICATE OF COMPLETION FROM TCHD VERIFYING ACCEPTANCE OF EXISTING
SEPTIC _____**

**WORKERS COMPENSATION CERTIFICATE _____ OR EXEMPT FORM _____ FOR
CONTRACTOR(S)**

NOTICE

Much of the Town of Newfield is in or borders an Agricultural District. Please be advised that farming activities are common and can occur without notice.

I have read and understand the application for a Building Permit and I also understand that I must notify the Code Official to arrange for the required inspections. I am the owner or the agent of the owner of the property described above and I grant permission to Town Officials to inspect at intervals necessary to insure compliance and issue the final certificate. All information given herein is correct to the best of my knowledge

Applicant or Agents Signature _____ Date _____

Property Owner Approval _____ Date _____

**DATE RECEIVED _____ OFFICE USE
DATE DENIED _____ DATE APPROVED _____
REASON _____ CODE SECTION _____**

CODE OFFICIAL _____

PLOT PLAN

MUST BE SUBMITTED FOR APPROVAL

MUST BE SUBMITTED FOR APPROVAL

INCLUDE ALL STRUCTURE'S AND DISTANCES FROM EACH OTHER AND LOT LINES. SHOW LOCATION OF THE NEW STRUCTURE(S) AND ALL EXCAVATION INCL. LOCATION AND DIMENSIONS OF STOCK PILES (INCLUDING DIMENSIONS FOR THE REMOVAL OF TREES, CLEARING OF LAND, ADDITION OF DRIVEWAYS, THE ADDITION OF SEPTIC SYSTEMS AND ALL GRADING.



NAME OF STREET WITH FRONTAGE _____