



**TOWN OF LIVINGSTON
BUILDING INSPECTOR
CODE ENFORCEMENT OFFICER
SAM HARKINS
POST OFFICE BOX 67
LIVINGSTON, NEW YORK 12541
(518) 851-9441 EXT. 314**

Office Hours

Monday 5pm-8pm

Thursday 3pm-8pm (5pm-8pm Admin. Assistant only)

Saturday 9am-11am (Admin. Assistant only)

Application for Building Permit

Please fill out form and send it back to the above address or drop it off to my office. Also enclose a check made out to the “Town of Livingston”. Below is the fee schedule. \$50 will be added to the cost of the Building Permit for the Certificate of Occupancy/Certificate of Compliance Fee.

Residential Building	.30/s.f.; \$100 minimum
Deck Permit	.25/s.f.; \$50 minimum
Commercial Building	.50/s.f.
Shed/Gazebo	\$25.00 (<144 s.f.)
Residential Demolition	\$125.00
Pool	\$175.00
Fence	\$20.00
Solar Arrays	.25/s.f.
Generator	\$50 no structure/ \$100 with structure
Outdoor Wood Boiler	\$25.00
Sprinkler	.15/s.f.; \$100 minimum

Contact Schedule

Please contact this office when **each** of the below named items have been completed.

- 1) Footing
- 2) Foundation/ Water Proofing
- 3) Framing
- 4) Plumbing
- 5) Insulation
- 6) Drywall
- 7) Final Inspection

****TAKE NOTE****

In an attempt to quantify time and costs relative to issuance of a Certificate of Occupancy or Certificate of Compliance, there is a \$50.00 fee for the FINAL inspection and an additional \$75.00 when re-inspection is necessary.

Additional Information Needed

1. Deed to property
2. Two copies of scaled drawings showing all details of construction and related footings, cross sections and floor plans. Only detailed drawings will be accepted and may be required to be submitted by a licensed design professional upon review of the Code Official. All applicable building codes must be adhered to from the N.Y.S. Residential, Building and Fire Codes.
 - A. Cross sections specifically drawn with materials to be used
 - B. Floor plans showing use of all rooms
 - C. Ceiling heights and projections
 - D. Window/Door clear opening sizes
 - E. Building/Structure elevations
 - F. Rafter/Joist/Header spans and sizes
 - G. Insulation values
 - H. Smoke/Carbon Dioxide detector placement
 - I. Plumbing/Mechanical details
3. Plot Plan Sheet provided must be filled out showing all sizes and setbacks of structure.
4. Any increase in bedrooms will require approval from the Board of Health, if septic is currently used

Take Note

If you are installing an alarm system, it MUST be registered in the Town, please contact this office for details.



Application for Building Permit
Town of Livingston

Date ___/___/___

Permit #: _____

Approved _____ Denied _____

Reviewed By: _____

Referred To: _____

Fee Paid: \$ _____

A permit must be obtained before beginning construction. No inspection will be made until applicant has received a valid building permit. Please answer all of the following.

Owner of property: _____

Address: _____

Property location: _____

Phone Number ___ - ___ - ___

Tax Map # _____

Subdivision Name (If applicable): _____ Lot No. _____

Name of Applicant: _____

Address of Applicant: _____

Phone Number: ___ - ___ - ___

****The person responsible for supervision of work as regards to building codes****

Name: _____

Address: _____

Phone Number: ___ - ___ - ___

Nature of Proposed Work (check ONE):

____ Construction of new building

____ Addition to existing building

____ Alteration to existing building (no change to exterior dimensions)

____ Other work (Describe): _____

Total Floor Area of Proposed Structure: _____ Sq. Ft.

Size of New Structure _____ Ft. x _____ Ft.

Foundation (Circle One): Pier Slab Crawl Partial Full

Foundation Wall Material _____

Foundation Wall Footing Size: _____" x _____"

Foundation Wall Thickness: _____ Ft. Height: _____ Ft.

Total depth below grade: _____ Ft.

Characteristics of Building (Check One):

Wood Frame

Steel

Brick

Concrete

Stone

Primary Heating System (Check One):

Electric

Oil

Gas

Other (describe) _____

Fireplace to be installed: Yes _____ No _____ N/A _____

Approximate Value of Proposed Construction: \$ _____

Zoning Information:

Size of property: _____ Ft. x _____ Ft.

Number of Acres: _____

Number of Existing Buildings on Property: _____

Use of existing buildings: _____

Proposed Building-Distance from property line

Front Yard _____ Ft.

Rear Yard _____ Ft.

Side Yard _____ Ft.

Side Yard _____ Ft.

Occupancy Information (Check One):

One Family Dwelling Two Family Dwelling Multi Family Dwelling
Number of Units _____ Business Industrial Other (Describe)

If addition, what will use be: _____

Accessory Building:

Attached garage
 Detached garage
 One/Two Car
 Private storage building
 Other (describe) _____

What zoning district is proposed project located in? (check one)

C-1
 CH-2
 HDR-2
 LDR-2
 AD/LI-1
 CON-7
 LC-1

Will project be a change of use when completed? Yes No N/A

Name of Architect/Engineer: _____

Address: _____

Phone Number: ____ - ____ - ____

Name of Contractor/Builder: _____

Address: _____

Phone Number: ____ - ____ - ____

Name of Plumber: _____

Address: _____ Phone No.: ____ - ____ - ____

Name of Mason: _____

Address: _____ Phone No.: ____ - ____ - ____

Name of Electrician: _____

Address: _____ Phone No.: ____ - ____ - ____

****PLEASE READ INFORMATION BELOW COMPLETELY****

One (1) set of plans and specifications for the proposed work shall be enclosed with the application and those plans and specifications shall be in accordance with the State Education Law, Sections 7307 and 7209. This law requires that the seal and signature for all farm buildings, residential buildings of under 1500 gross sq. ft. or for alterations costing under ten thousand dollars (\$10,000.00). (The applicant may request that the requirement of plans and specifications be waived where the work to be done involves minor alterations or are otherwise unnecessary.)

****ONE (1) PLOT PLAN MUST BE PREPARED AND SUBMITTED**, drawn reasonably to scale, and attached hereto, showing clearly and distinctly all buildings, whether existing or proposed and indicate all setback dimensions from property lines. Show location of water supply and location and configuration of septic disposal area. ******

****DECLARATION****

To the best of my knowledge and belief the statements contained in this application, together with the plans and specifications, are a true and complete statement of all proposed work to be done on the described premises and that all provisions of the New York State Fire Prevention and Building code, the Town of Livingston Zoning Laws, and all other laws pertaining to the proposed work shall be completed with, whether specified or not, and that such work is authorized by the owner.

(Must be signed by applicant, or application is invalid)

Signature: _____

Date: ___/___/___

Reviewed by Code Enforcement Officer/Building Inspector:
Signature: _____

Date: ___/___/___

Special conditions of permit: _____

By: _____
Code Enforcement Officer/Building Inspector