

**VILLAGE OF FLORIDA
BUILDING PERMIT APPLICATION**

Accepted payments: check or money order made payable to The Village of Florida all payments due with application before review.

Application is hereby made to the Building Department for the issuance of a Building Permit pursuant to the Code of the Village of Florida and the New York State Uniform Fire Prevention and Building Code for the construction of Buildings, additions or alterations, or for removal or demolition, as herein described. The applicant agrees to comply with all applicable laws, ordinances and regulations.

Date: _____

CHECKLIST: All must be checked prior to submitting permit application to the Building Department

_____ **PLAN OR SKETCH, IF NECESSARY** _____ **PROJECT DESCRIPTION IN DETAIL**
_____ **SURVEY SHOWING SETBACKS** _____ **INSURANCE (WAIVER OR CERTIFICATE)**

IF YOU HAVE PURCHASED THIS PROPERTY WITHIN LAST 6 MONTHS-PROVIDE DOCUMENTATION

SITE DATA:

Section/Block/Lot: _____ - _____ - _____

Street Location: _____

PROJECT:

_____ **New** _____ **Existing**
_____ **Accessory Building – with electric Yes or No**
_____ **Swimming Pool/ Hot Tub (see pool packet)**
_____ **Solar Panels (Roof Mount or Ground Mount)**
_____ **Deck/Porch: Rear Side Front**
_____ **Fence: Front Rear Side Height** _____
_____ **Roof Replacement (re-roof)**
_____ **Woodstove/Pellet Stove/Fireplace**
_____ **Finished Basement – (provide layout sketch)**
_____ **Additions – (Provide NYS stamped plans & Detail description)**
_____ **Renovations – (Provide scope of work in detail)**
_____ **Electrical – Upgrading, extending or altering wiring system**
_____ **Removal, Abandonment or Installation of Oil Tanks**
_____ **Dwelling or Commercial Building**
_____ **Other:** _____
_____ **Renewal of Permit#:** _____

DESCRIPTION:

SIZE:

_____ _____
_____ _____
ABOVE OR IG _____
of Panels _____ **Sq.Ft.** _____
Size: _____

Estimated Cost of Construction: _____

APPLICANT INFORMATION: (Owner Authorization is required if applicant is not property owner)

Name: _____

Mailing Address: _____

City/State/Zip Code: _____

Phone: _____ **Alt. Phone:** _____

Email: _____

***Please call our office 845-651-7626 or check our website www.VillageofFloridaNY.org for our complete list of permit requirements**

OWNER INFORMATION:

Name: _____
Mailing Address: _____
City/State/Zip Code: _____
Phone: _____ Alt. Phone: _____
Email: _____ Zone District: _____
Property Size/Acreage: _____ Owner Waiver Letter: ____ Yes ____ No

ENGINEER OR ARCHITECT INFORMATION:

Name: _____
Address: _____
Phone: _____ Email: _____

CONTRACTOR INFORMATION:

Company Name: _____
Contact Name: _____
Address: _____
Phone: _____ Email: _____

***Contractor must supply a copy of their Liability Insurance Certificate and Workman's Compensation Certificate naming The Village of Florida as Certificate Holder. No permit will be reviewed or issued unless this is provided.**

DIMENSIONS OF NEW CONSTRUCTION – RESIDENTIAL OR COMMERCIAL

Front: _____ Rear: _____ Depth: _____
Number of Bedrooms: _____ Number of Bathrooms: _____
Garage (attached or detached & # of cars include sq ft): _____
First Floor Sq. Ft: _____ Second Floor Sq. Ft: _____
Total Square Footage: _____

*****Affadavit of Exemption required upon submission of application if property owner is completing work.**

FOR OFFICE USE ONLY:

Total Fee Due: _____ Balance: _____
Check or Money Order#: _____
DATE RECEIVED: _____
DATE REVIEWED: _____
DATE DISAPPROVED: _____
REASON: _____
REFERRED TO: _____