

**Town of Sterling**  
**1290 State Route 104A Sterling, NY 13156**  
**PHONE (315) 947-5666 FAX (315) 947-5119**  
**BUILDING PERMIT APPLICATION**

Date Submitted: _____ Date Approved: _____  Approved By: _____ Building Permit Fee: _____ Check #: _____	Date Denied: _____ Reason Denied: _____ Date Appealed: _____ Decision of Appeal: _____ Date Footing Inspection: _____ Date Foundation Inspection: _____	Date Framing Inspection: _____ Date Insulation Inspection: _____ Date Plumbing Inspection: _____ Date Electrical Inspection: _____ Date Final Inspection: _____ Date C of O or C of C Issued: _____
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Application is hereby made to the Town of Sterling for the issuance of a Building Permit pursuant to all applicable codes, ordinances, and laws regulating the erection, construction, enlargement, addition, alteration, repair, replacement, improvement, removal, demolition, conversion, and change in the occupancy of any building or structure within the boundaries of the Town of Sterling at the following location:

1. PROJECT ADDRESS \_\_\_\_\_ TAX MAP NO. \_\_\_\_\_ ZONING District \_\_\_\_\_

2. PROPERTY OWNER NAME: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 PHONE: \_\_\_\_\_

3. ARCHITECT/ENGINEER: \_\_\_\_\_ RA# \_\_\_\_\_ PE# \_\_\_\_\_ CONTACT PERSON \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ PHONE \_\_\_\_\_

4. CONTRACTOR: \_\_\_\_\_ CONTACT PERSON \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ PHONE \_\_\_\_\_  
 (Contractor's shall include with this Building Permit Application an Insurance Certificate for Workers Compensation and Disability Insurance)

5. IS PROPERTY OWNER DOING ALL WORK? \_\_\_\_\_ YES \_\_\_\_\_ NO  
 (If yes, Property Owner shall include with this Building Permit Application a notarize Affidavit of Exemption Form and submit proof of Homeowner's Insurance.)

6. PROPERTY CURRENT USE: ( ) RESIDENTIAL ( ) COMMERCIAL ( ) INDUSTRIAL

7. NATURE OF WORK (check all applicable):  
 \_\_\_\_\_ Demolition \_\_\_\_\_ Deck \_\_\_\_\_ Wood Stove \_\_\_\_\_ Sign  
 \_\_\_\_\_ New Building/Structure \_\_\_\_\_ Porch \_\_\_\_\_ Chimney \_\_\_\_\_ Fence  
 \_\_\_\_\_ Addition \_\_\_\_\_ Shed \_\_\_\_\_ Pool (In or Above Ground) \_\_\_\_\_ Outdoor Furnace  
 \_\_\_\_\_ Repairs, Renovations, Alterations \_\_\_\_\_ Garage/Pole Barn \_\_\_\_\_ Manufactured Home (HUD or State Approved)

8. DESCRIPTION IN DETAIL OF PROPOSED PROJECT AND ITS USE (as required in Building Permit Application Guide)

9. ESTIMATED VALUE OF WORK, MATERIALS AND LABOR \$ \_\_\_\_\_

10. CONSTRUCTION TYPE: ( ) Wood ( ) Steel ( ) Masonry ( ) Other

11. SET BACK FROM LOT LINES Front \_\_\_\_\_ Rear \_\_\_\_\_ Side 1 \_\_\_\_\_ Side 2 \_\_\_\_\_

12. LOT FRONTAGE \_\_\_\_\_ LOT DEPTH \_\_\_\_\_

13. IS THE PROJECT IN A FLOOD ZONE? ( ) YES ( ) NO IS THE PROJECT WITHIN 100' OF ANY WETLANDS? ( ) YES ( ) NO

*The below signed Property Owner and Contractor agrees to allow the Building Inspector to inspect the sufficiency of the work being done pursuant to this Building Permit Application; comply with all applicable laws, ordinances, and regulations; confirms that all statements contained in this application are true to the best of his/her knowledge and belief and agrees that the work will be performed in the manner set forth in the Application and in the plans and specifications filed herewith.*

Print Name of Property Owner \_\_\_\_\_

Signature of Property Owner \_\_\_\_\_

Sworn before me this \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_ Notary Public \_\_\_\_\_

Print Name of Contractor \_\_\_\_\_