

# **SINGLE FAMILY HOME OR COMMERCIAL BUILDING PERMIT APPLICATION PROCEDURES AND CHECKLIST**

**(Do not use this form for pole barns, swimming pools, decks or porches)**

- ❑ 1. To proceed with permit you must have a property 911-address number or obtain a property address number from the 911-address system (716) 753-4611.
- ❑ 2. A copy of the paperwork from the County Health Department, (716) 753-4481, must be on file regarding septic system and private wells. There must be compliance with all Chautauqua Co. Health, rules regarding septic system and well. If there is public water please contact the Town of Portland Water Dept. at (716) 792-9614. If there is public sewer please contact the PPD Sewer District at (716) 672-8778.
- ❑ 3. Complete General Information sheets of Building Permit Application.
- ❑ 4. Complete plot plan noting all setbacks. These must comply with local zoning regulations. If zoning district is not known, contact building/zoning officer.
- ❑ 5. If you are doing the work yourself and with less than 40 hours (cumulative) outside help, submit a current copy of your homeowner's insurance indicating dates policy is in effect and complete form BP-1.  
- OR -
- ❑ 6. If the contractor doing the work is a sole proprietor or a partnership and has no employees, form CE 200 must be filed, for each job, with the New York State Worker's Compensation Board Office ([www.wcb.state.ny.us](http://www.wcb.state.ny.us)). Also a current copy of Liability Insurance must be filed with us naming the Town of Portland as the Certificate Holder.  
- OR -
- ❑ 7. If contractor doing the work hires any part time or full time help or leases employees, the following proofs of insurance must be on file with this office naming the Town of Portland as the Certificate Holder:
  - **Certificate of NY State Workman's Compensation Insurance** (C-105.2 or U-26.3, ACORD forms are not accepted).
  - **Certificate of Liability Insurance** (ACORD 25)
  - **Certificate of Insurance Coverage under the NYS Disability Benefits Law** (DB-120.1)
- ❑ 8. A copy of your survey is required for new construction unless you reside in a mobile home park. If you reside in a mobile home park, please follow their procedures as well as the Town's.
- ❑ 9. Two sets of plans for foundation, building and landscaping (commercial project) must be submitted. Plans are to be drawn by a design professional. Stamped plans are required for all commercial building and for residential construction over 1500 sq. ft. Single and doublewide manufactured homes will have HUD paperwork. Modular and other purchased plans must be New York State plans. Additions require plans drawn to scale. They may not have to be done by a design professional.
- ❑ 10. You must comply with DEC or FEMA Regulations related to wetlands, flood zones and lakeshore. SEQR; and Department of Labor requirements (i.e. asbestos removal laws).

**KNOW WHAT'S BELOW, CALL BEFORE YOU DIG.** Making one-call just got easier – just dial 8-1-1 when you need to make an underground facility locate request. State and federal laws require a person to call their area one-call center at least two days, and in some cases three days, prior to beginning excavation. Excavators can now use the national designated three-digit number, 811, or continue to use individual state one-call numbers to reach their local one-call center. For more information on the 811 program and media campaign, please visit [www.call811.com](http://www.call811.com).

**Please call 716-792-9618 before you come to Town Hall for your Permit.**  
**Office hours are Monday and Tuesday 8:00 AM – 4:00 PM & Wednesday 8:00 AM - 12 Noon.**

## BUILDING/ZONING PERMIT APPLICATION TOWN OF PORTLAND

### General Information:

- A. **COMPLIANCE** – Applicants are responsible for complying with all regulations in the NYS Building Code and Town of Portland Zoning Law as well as other laws (e.g. Health Dept. Permits, etc.)
- B. **ASSISTANCE** – Forms shall be filled out as accurately and completely as possible. Assistance is available from the Code Enforcement Officer.
- C. **FEE** – A fee specified in the Zoning Law must be paid prior to processing this application.
- D. **TIME FOR PROCESSING** – Approval or denial will be sent or given to the applicant within 2 weeks from the date the application and all supporting documentation is received.
- E. **ANSWERING QUESTIONS** – All questions must be answered prior to the processing of the permit.

### APPLICANT INFORMATION:

A. **APPLICANT NAME:** \_\_\_\_\_  
**Mailing Address:** \_\_\_\_\_  
**Phone Number:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

B. **OWNER/NAME:** \_\_\_\_\_  
**Mailing Address** \_\_\_\_\_  
**Phone Number:** \_\_\_\_\_

C. **CONTRACTOR'S NAME:** \_\_\_\_\_  
**Mailing Address:** \_\_\_\_\_  
**Phone Number:** \_\_\_\_\_

**CONSTRUCTION TIME PERIOD** – Start Date: \_\_\_\_\_ Completion Date \_\_\_\_\_

### PROPERTY LOCATION: (Construction Site)

- A. **Street or Road** \_\_\_\_\_
- B. **Section/Block/Lot from tax map** \_\_\_\_\_
- C. **Zoning District (check one):** AG \_\_, AG-R \_\_, NC \_\_, R2 \_\_, R3 \_\_, HC \_\_, LC \_\_, LL \_\_, CR \_\_

### PROJECT USE & DESCRIPTION: (answer all applicable questions)

A. **Type Use (check one):** Residential \_\_, \*Commercial \_\_, \*Industrial \_\_, Other \_\_\_\_\_  
**Explain in more detail (e.g., two family, farm machinery sales, etc.)** \_\_\_\_\_

B. **Which describes the project (Permit is for) check one:**  
Single Family Home \_\_, New Building \_\_, Addition \_\_, Repair/Retrofit \_\_, Alteration \_\_, Demolition \_\_, Sign \_\_,  
Conversion \_\_, Fence \_\_, Land Use Only \_\_, No Structures \_\_,  
Other (please explain in detail) \_\_\_\_\_

C. **TYPE OF CONSTRUCTION:** Wood Frame \_\_, Block \_\_, Pole Barn \_\_, Manufactured Housing \_\_, Modular \_\_,  
Other (Explain in more detail) \_\_\_\_\_

\* For Commercial Structures or Commercial Land Use: See Site Plan Review Application and Requirements.

- D. **SIZE: Floor space in dimensions** \_\_\_\_\_ **Square Footage** \_\_\_\_\_  
**Height in Stories and feet to Eaves** \_\_\_\_\_
- E. **COST: Estimated Construction Cost** \_\_\_\_\_
- F. **BUILDING MATERIALS: Please list on Separate Sheet**
- G. **MANUFACTURED HOUSING: Single Wide**\_\_\_\_, **Double Wide**\_\_\_\_  
**Year of Manufacturer** \_\_\_\_\_, **Serial Number** \_\_\_\_\_, **Model** \_\_\_\_\_

**PLOT PLAN (See Page 4):** On the separate enclosed sheet, graphically and approximately to scale, describe the proposed structure as it relates to its surroundings. Include: buildings, driveways, parking/loading areas, sign locations, fences, adjacent roadways, steep slope areas, distance of structures to road/boundary lines, lot dimensions, and other important features. Include 2 copies of any blue prints (1 copy will be returned to you with any required changes).

**ENVIRONMENTAL CONCERNS:** Prior to granting the building/zoning permit, assurances must be received that the applicant has complied with all environmental laws. County Health Department approved water and sewer is mandatory where applicable. Check which of the following laws apply: (1) Health (sewer & water)\_\_\_\_, (2) Flood Insurance\_\_\_\_, (3) State Environmental Quality Review Act (SEQR) \_\_\_\_\_. Attach written approval or permit with this application.

**OTHER INFORMATION:** (Answer all applicable questions)

- A. **ACCESSORY USES – Describe all accessory uses to be included: include size, location and use.** \_\_\_\_\_  
 \_\_\_\_\_
- B. **PARKING/LOADING – Specify the number, size, location of all parking places and/or loading spaces to be provided:** \_\_\_\_\_  
 \_\_\_\_\_
- C. **STREET ACCESS – Is lot adjacent to existing roadway? Yes** \_\_\_\_\_ **No** \_\_\_\_\_  
**Is a driveway to be constructed in a road right-of-way? Yes** \_\_\_\_\_ **No** \_\_\_\_\_
- D. **SEASONALITY – Is this structure to be used year-round? Yes** \_\_\_\_\_ **No** \_\_\_\_\_

**SIGNATURES:** The above information is accurate to the best of my knowledge:

**Owner of Property:** \_\_\_\_\_  
 \_\_\_\_\_ (Signature)

**Applicant:** \_\_\_\_\_  
 \_\_\_\_\_ (Signature)

**OFFICIAL USE ONLY:** PERMIT # \_\_\_\_\_

Type of Construction: \_\_\_\_\_ Occupancy \_\_\_\_\_  
 Existing Use: \_\_\_\_\_ Proposed Use: \_\_\_\_\_  
 Fee Paid: \$ \_\_\_\_\_ Cash \_\_\_\_\_ Check No. \_\_\_\_\_  
 Approved \_\_\_\_\_ Rejected \_\_\_\_\_ ZBA Approval \_\_\_\_\_ Planning Board Approval \_\_\_\_\_

\_\_\_\_\_  
Building Inspector's Signature Date

### PLOT PLAN

1. This page shall be used for the drawing of a plot plan for all major construction and additions and in such other cases as the Building and Zoning Officer deems necessary.
2. The plot plan shall show the location and size of the lot, locations and sizes of buildings and structures upon the premises (both existing and proposed) and their relationship to adjoining premises and public streets.
3. Locate and label clearly and distinctly all building and structures, show widths and depths of all yards, show names of all streets and indicate north with an arrow.

**SHOW DISTANCE FROM ANY BUILDING TO SIDE, FRONT AND REAR LOT LINES**  
**SHOW DISTANCE BETWEEN ANY BUILDINGS**

Rear of Lot \_\_\_\_\_ ft.

Left side depth of lot \_\_\_\_\_ ft.

Right side depth of lot \_\_\_\_\_ ft.

Frontage of lot \_\_\_\_\_ ft.

Street Name \_\_\_\_\_



Code Enforcement/Zoning Office  
87 West Main Street, Brocton, New York 14716  
Telephone: (716) 792-9618  
Fax: (716) 792-9610

**THE PERMIT HOLDER MUST NOTIFY THE  
CODE ENFORCEMENT OFFICER AT (716) 792-9618  
WHEN ANY ELEMENT OF WORK INDICATED  
BELOW IS READY FOR INSPECTION.**

**WORK SHALL REMAIN ACCESSIBLE AND EXPOSED  
UNTIL INSPECTED AND ACCEPTED BY THE CODE  
ENFORCEMENT OFFICER OR AN INSPECTOR AUTHORIZED  
BY THE CODE ENFORCEMENT OFFICER.**

1. Footer (rebar in Trench)
2. Foundation Walls
3. Framing
4. Electrical
5. Plumbing
6. Insulation
7. Stairs/Deck
8. Code Enforcement Officer must do a Final Inspection  
**AND/OR** an Electrical Inspection Certificate must be  
received in our office

Office hours are: Monday and Tuesday 8:00 am – 4:00 pm, Wednesday 8:00 am – 12 noon  
*Please leave message if outside of these office hours*