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TOWN OF LONG LAKE
CODE ENFORCEMENT OFFICER
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Building Permit Application

Date: _____
 Date you intend to begin building _____
 Name of applicant: _____
 Applicant's Home phone number: _____
 Applicant's Business phone number: _____

Office Use Only	
Permit #	_____
Date rc'd	_____
Fee paid	_____
Plans	_____

Applicant's address: _____

Name of owner: _____

If new owner, please name previous owner also: _____

Tax map number of property that will have the construction on it: (found on your tax bill) _____

Owners permanent address: _____

Owners summer address: _____

Owners phone number: _____

What do you intend to build? _____

Will this be a seasonal residents, or year around residence? _____

What is the estimated cost of the project? \$ _____

Location of property; use landmarks, and names of neighbors: _____

Adirondack Park Agency Zone designation: _____

If you are constructing a new dwelling, have you applied to the Town of Long Lake for a water hook-up Yes No

If not, would you like an application? Yes No

Are you installing a new septic? Yes No

Are you replacing an existing septic system? Yes No

If the answer is yes to either of these two questions, a percolation test is necessary (it can be done b the contractor or owner but the building inspector MUST know when it will be done and oversee it) and a site plan giving details of the entire system with distances from water, wells, or wetlands as well as property lines and water pipes.

Name of principal contractor: _____

Address: _____

Contractor's home phone: _____ Business Phone: _____

Principle contractor's workman's compensation policy company and number: _____

Effective date: _____

Is this a commercial project? Dwellings that you intend to rent or sell, or buildings that will be used as a place of business: Yes No

Name of Architect/Engineer: _____

Architect's/Engineer's Address: _____
Architect's/Engineer's Phone Number: _____

Be aware that any **NEW BUILDING** project of more than 1500 gross floor area (that includes decks, porches, uninhabitable basements, attics or attached garages) must have the seal or stamp of a **New York State** Certified Architect or Engineer on the blue prints or building plans.

Name of mason: (if applicable) _____
Name of plumber: (if applicable) _____
Name of electrician: (if applicable) _____

Will you be installing a heating system? Yes _____ No _____
What type of heating system will you be installing, or do you presently have? Hot Air _____ Wood Burner _____
Natural Gas _____ Electric _____
Fuel Oil _____ Other _____

What type of foundation will you have and how deep (please describe) _____

Will you have electricity? Yes _____ No _____

Remember that if you install electricity or add to the present electrical system, you will need an approved Electrical Underwriter to inspect the finished product before being issued a Certificate of Occupancy.

What type of R-value insulation will you be using? Walls _____ Ceiling _____ Floor _____

ALONG WITH THIS APPLICATION, A SET OF PLANS OR BLUE PRINTS MUST BE SUBMITTED. THESE PLANS SHOULD INCLUDE THE FOLLOWING IN EITHER DIAGRAM OR TEXT FORM:

- a. Building elevation
- b. Plumbing plan
- c. window types and sizes
- d. Cross sections showing foundation details
- e. Location of primary and secondary heating systems, including chimney
- f. interior and exterior wall construction
- g. electrical layout
- h. exterior wall elevations
- i. Door locations, types and sizes

The building inspector has the right to request further and/or more detailed information.

_____ says that he/she is the applicant. He/she is the (circle one) owner, agent for the owner, contractor for the owner and is duly authorized to perform or have performed the said work and to make and file this application; that all statements contained in this application are true to the best of his/her knowledge and belief, and that the work shall be performed in the manner set forth in the application and specifications filed therewith, and in compliance with the New York State Uniform Fire Prevention and Building Code.

Signature of Applicant: _____

Mail Permit to? Owner _____; Agent _____; Contractor _____.

Signature, Code Enforcement Official: _____