

APPLICATION FOR ZONING and/or BUILDING PERMIT
TOWN OF STAFFORD, N. Y. 14143

APPLICATION NUMBER: _____

APPLICATION DATE: _____

OWNER	Name: _____	APPLICANT <small>(IF OTHER THAN OWNER)</small>	Name: _____
	Address: _____		Address: _____
	Phone #: _____		Phone #: _____

PROJECT SITE LOCATION: _____ Tax Map # (TMP) _____ Check w/ local Assessor or Tax Bill

INSTRUCTIONS: *Using a ball point pen please fill out this application as completely as possible. Submit additional Attachment(s) [listed on the back of the Gold sheet] and the completed application to the Z.E.O./C.E.O. This application is **NON-TRANSFERRABLE** and is **NOT** a permit to commence work.*

- ① Application for Use: RESIDENTIAL ; COMMERCIAL ; INDUSTRIAL ; RECREATIONAL ; AGRICULTURAL ; SITE PLAN
- ② Permit for: NEW CONSTRUCTION ; ADDITION ; ALTERATION ; REPAIR ; CHANGE IN USE
- ③ Is this parcel? ; A corner lot: YES NO ; Have a Driveway permit? YES NO . In a Water District? YES NO .
- ④ List the DIMENSIONS of the parcel: _____ x _____ and/or TOTAL PARCEL AREA (Acres) _____ .
- ⑤ What are the parcel setbacks [Ft.] from the project. FRONT _____ ; REAR _____ & SIDE yards (a) _____ (b) _____ . **Attachment A**
- ⑥ Total % of coverage of ALL buildings on the parcel (including the proposed project): _____ TOTAL %
- ⑦ Does this project require County Health Department approval? NO YES , If yes, submit **Attachment F**.
- ⑧ Is this parcel properly Land Separated/Subdivided? NO YES , If yes, provide documentation.
- ⑨ Do you give the Town VALID CONSENT to do the required inspections? YES NO , If no, what procedures?
- ⑩ Name of Architect/Engineer _____ Telephone # _____
Address _____

- ⑪ Name of Contractor(s) _____ Telephone # _____
Address _____

⑫ Estimated cost of the project? _____ [Substantiation may be required] ⑭ Total Dwelling units: _____

PROPOSED PROJECT	HEIGHT	LENGTH	WIDTH	SQ. FT.
HOUSE (1st. floor)				
OTHER (or 2nd floor)				
GARAGE				
ACCESSORY BUILDING				
SWIMMING POOL				
DECK				
COMMERCIAL/INDUSTRIAL				

- ⑮ Will electric be installed? YES NO .
- ⑯ Describe the proposed project and use:

TOTAL SQ. FT. _____

[Use additional sheet(s) for more information]

★ **SIGNATURE BLOCK** ★
I hereby certify that I have read the instructions and examined this application and supporting attachments and know the same to be true and correct. All provisions of laws and ordinances covering this type of work or use will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel provisions of any other state or local law or ordinance regulating construction or performance of construction.

Signature - OWNER _____

Signature - APPLICANT (If different than owner) _____

Date _____

Date _____

Action taken by Zoning Enforcement Officer : APPROVED DENIED , Action necessary: SPECIAL USE: SITE PLAN:

Article _____ Section _____ Subsection _____ Paragraph _____ Briefly Describe: _____ SCHEDULE A: VARIANCE: Area Use

OFFICE USE ONLY	Attachments Required: _____	F E S	Zoning \$ _____	Cash : _____	
	Z.E.O./C.E.O. _____		Building \$ _____	Check # : _____	
	Date of Action: _____ <small>Signature</small>		Wetlands <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>	Late \$ _____	Receipt # : _____
			Flood Plain <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL \$ _____	