



# TOWN OF UNION

## Building Permit Application

Code Enforcement and Building Permits  
3111 E. Main Street  
Endwell, NY 13760  
Phone: 607-786-2920 Fax 607-786-2320

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### Property Information

Address \_\_\_\_\_

Owner \_\_\_\_\_ Phone No. \_\_\_\_\_

Zoning District: \_\_\_\_\_ Property Classification: \_\_\_\_\_ Flood Zone: \_\_\_\_\_

Site Plan Review Required? Y/N Approve Date: \_\_\_\_\_ Special Permit Required? Y/N Approval Date: \_\_\_\_\_

Is a Variance Required? Y / N Type(s): \_\_\_\_\_ Approval Date: \_\_\_\_\_

### Permit Contact Information

Primary	Name	Title	Phone
	Address	Email	
Secondary	Name	Title	Phone
	Address	Email	
Engineer	Name	Title	Phone
	Address	Email	
Contractor	Name	Title	Phone
	Address	Email	
	Insurances: Disability DB120.1 _____ Workers Compensation C105.2 _____ Certificate of Exemption CE200 _____		
Contractor	Name	Title	Phone
	Address	Email	
	Insurances: Disability DB120.1 _____ Workers Compensation C105.2 _____ Certificate of Exemption CE200 _____		

### DESCRIPTION OF WORK BEING DONE

BUILDING OR DEMOLITION PLANS & PLOT PLANS MUST BE SUBMITTED WITH THIS APPLICATION

Purpose: Erect \_\_\_\_\_ Repair \_\_\_\_\_ Renovate \_\_\_\_\_ Extend \_\_\_\_\_ Move \_\_\_\_\_ Demolish \_\_\_\_\_

Change of Occupancy: N/Y \_\_\_\_\_ Cost of Construction: \$ \_\_\_\_\_

Description of work: \_\_\_\_\_

\_\_\_\_\_



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### Permit Information

- The Contractor is responsible for contacting the appropriate inspector for the necessary inspections. The Building Inspector must be notified at least 24 hours in advance of any proposed inspections.
- An Excavation Permit is required for any disturbance of ground construction.
- A Sewer/Water Permit is required for a hookup to the Municipal Sewer/Water System.
- A Street Work Permit from the Highway Department is required for any work that entails disturbances to sidewalks, curbs, gutters or streets.
- No new building is to be occupied or used, in whole or part, for any purpose until a Certificate of Occupancy is issued by the Building Inspector.
- Building permit expires after twelve (12) months from the date of issuance. If no work has commenced within six (6) months of the date of issuance of the building permit, the permit is void.

**Call before you dig! Call Dig safely at 811 or go to [www.digsafelynewyork.com](http://www.digsafelynewyork.com)**

### AFFIDAVIT

The undersigned being duly sworn, deposes and says that he/she is the owner or authorized agent of the owner, and that he/she is conversant with the Zoning Code of the Town of Union and the rules and regulations pertaining thereto, and that the completed structure and/or occupancy for which this application is made will be in accordance with the New York State Building Code and all existing laws governing the erection and occupancy of structures and premises in the Town of Union, whether specified herein or not, and that all workmen engaged thereupon are covered by Workmen's Compensation Insurance and Disability Insurance, certificates of which are herewith filed with the issuing authority or if not required by law to provide such insurance, a completed Form CE-200, and that permission is hereby granted and the building inspector is authorized to enter upon the property, premises and/or structure during the course of construction to ascertain compliance with all applicable building codes, zoning laws and other applicable federal, state or local laws or regulations.

Signature (Owner or Authorized Agent): \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Permit issued by: \_\_\_\_\_ Title: \_\_\_\_\_

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Building Permit Number: \_\_\_\_\_ Fee Amount: \_\_\_\_\_ Receipt Number: \_\_\_\_\_