## PROCEDURE FOR FILING AN APPLICATION FOR A BUILDING PERMIT

A Building Permit is required for the construction, repair, renovation, alteration, improvement or change of use of any structure and for the construction and/or installation of fences, walls, pools, tool sheds, decks, signs, etc.

All applications, except interior alterations to a building, <u>MUST</u> be approved by the Board of Architectural Review <u>PRIOR</u> to the issuance of a Building Permit. Said Board of Architectural Review meets on the <u>1ST AND 3RD TUESDAY</u> evening at 8:00 P.M. with the exception of July and August when they may only meet once during each of those periods.

All applications must be reviewed by the Building Inspector for compliance with the applicable Building Codes and Zoning Ordinances prior to placement on the B.A.R. agenda. You will be notified by the Building Inspector when to attend the B.A.R. meeting.

The application shall be <u>filled out completely and legibly</u> with three sets of plans containing the following information:

- 1. Elevation drawings showing all affected areas of construction (exterior only).
- 2. Floor plans.
- 3. Structural drawings and details including mechanicals, electric, and plumbing.
- 4. Three copies of the Zoning Worksheet filled out completely and legibly.
- 5. Fire sprinkler plans are required for all new construction, and for alterations and additions to existing structures that have an existing fire sprinkler system.
- 6. Survey of property and structures thereon.
- 7. Topographical information.
- 8. Storm water drainage and containment plans.
- 9. Photographs of the site where construction is proposed; minimum of three (3).
- 10. One photograph showing the front of building and/or property.
- 11. One photograph of each adjacent structure as taken from the street and center line of said structure.
- 12. All plans shall be drawn in a professional manner so as to comply with the New York State Education Law which requires an architect's or engineer's signature and seal.
- 13. The complete address and telephone number of the applicant, property owner, architect, and contractor. Note: If the applicant is not the owner, a letter of permission from the property owner is required.
- 14. Application must be accompanied by the **REQUIRED \$75.00 APPLICATION FEE.** A permit fee will be due and payable upon issuance of the building permit. Call the office for the fee schedule

- A. Failure to comply with the above may result in unnecessary delay in the consideration of your application by the Building Inspector and/or Board of Architectural Review.
- B. The Building Department will not accept any application that does not include all of the foregoing.
- C. The applicant or a representative is <u>required to</u> attend the Board of Architectural Review meeting. The installer of new signs, fences, and similar structures must be present when the Board of Architectural Review examines applications.
- D. Upon denial or amendment by the Building Inspector or Board of Architectural Review, the applicant may appeal in person at the next regular scheduled meeting of the Zoning Board of Appeals.

IF YOU WILL BE USING VEHICLES IN EXCESS OF 10 TONS MORE THAN ONCE IN A SINGLE WEEK, YOU MUST FILE A BOND AS PER ARDSLEY VILLAGE CODE, SECTION 190-14.

## VILLAGE OF ARDSLEY BUILDING DEPARTMENT 507 ASHFORD AVENUE

## ARDSLEY, NEW YORK 10502

Phone: 914-693-6961 Fax: 914-693-3706

APPLICATION #:		APPLICATION DATE:				
PERMIT #:		APPLICATION FEE:				
ISSUE DATE:	PERMIT FEE:					
I/We do hereby make application for a ( ) Erect a Building ( ) Addition t ( ) Alter a Building ( ) Repairs/re	o a building ( ) Insta		Demolish Buildin	g		
Description of work:						
Cost of Work:scaffolding, fixed equipment, profession accordance with the following states this application, I (or We) do hereby comprovisions of the New York State Uniff Code of the Village of Ardsley, the reg of New York, and other applicable law 6 months after the application date, uniform the state of the Village of Ardsley.	ments, the specification of the construction of the Health of the specified has a substitution of the Health of the specified has a substitution of the Health of the specified has a substitution of the Health of the specified has a substitution of the Health of the specified has a substitution of the Health of the specified has a substitution of the specification	ons and labor which ons and plans he otion, alteration and Building Co of Departments of herein or not. The	erewith submitted a or demolition will ode, the Building Co of Westchester Counts application will	gratis) and made part of comply with all ode and Zoning nty and the State		
Signature of Property Owner	Sign	Signature of Person making Application				
Street Address of Proposed Work						
Parcel ID #: SectionSub Sec	Block	Lot	Zoning Di	strict		
Property Owner (print name)			Phone #			
Address of owner:	City	:	State:	Zip:		
Property Lessee (print name)			Phone #			
Address of lessee:	Cit	y:	State:	Zip:		
Applicant (print name)			Phone #			
Address of applicant	Cit	y:	State:	Zip:		

Use of Building	Type of Foundation	Гуре of Foundation				
Type of frame	me Type of Roof Fr					
Type of Water Supply		Type of Sewage D	isposal			
Number of Families	Total # c	of Rooms	# of Bedrooms			
# of Baths	# of Kito	chens	Type of Heat			
Fire Sprinkler System	Fireplace	Fireplace		Year Built		
Central Air	Garage (	Garage Capacity		Finished Bsmt?		
Basement Sq/Ft	First Flo	or Sq/Ft	Second Floor Sq/Ft			
Construction classification: Combustible 2A or 2B, Type 3	Ordinary, 3A or 3B, 7	(Type 1 Non-comb Γype 4 Heavy Timber, T ********	ype 5 Wood Fran	, Type 2 Non- ne 5A or 5b)		
Who will supervise the work:				, architect, etc.)		
Architect (print name)		Phone #				
Address of architect:		License #				
City:		State:	Zip:			
Engineer (print name)			_ Phone #			
Address of engineer:			License #			
City:		State:Zip:				
Contractor (print name)			Phone #			
Contractor Address:		City:		Zip:		
Vestchester County Home Improvement License #		Expiration date				
TYPE OF INSURANCE	POLICY #	<b>EXPIRATION</b>	INSURANC	CE COMPANY		
Workmen's Compensation Disability Benefits Insurance General Liability						
NOTE: Applicant must furnis of permit.	sh <u>Certificates of Ins</u>	urance evidencing the a	bove coverage p	rior to issuance		
I WILL BE USING VEHICL	ES IN EXCESS OF	10 TONS. YES	NO	_		