

TOWN OF JOHNSTOWN

2753 STATE HWY 29
JOHNSTOWN, NY 12095

Phone: 518-762-7346 fax: 518-762-7072
Cell 518-571-0899
buildings@townofjohnstown.org

BUILDING PERMIT APPLICATION

SBL#: _____
FEES: _____
APPROVED () DENIED ()
C.E.O. signature _____

(Please Print)

APPLICANT INFORMATION:
NAME _____
MAILING ADDRESS _____
CITY, STATE, ZIP CODE _____
PHONE _____ EMAIL _____
PROJECT ADDRESS IF DIFFERENT _____

PROJECT TYPE

- () SINGLE FAMILY HOME Width _____ Length _____ Height _____ Sq Ft _____
Stories _____ Bathrooms _____ Bedrooms _____ Heat type _____
- () ADDITION Width _____ Length _____ Height _____ Sq Ft _____
- () ALTERATIONS

*****MANUAL J REQUIRED FOR HVAC IN NEW HOMES, ADDITIONS AND ALTERATIONS*****

- () New Garage () Septic System/Repair () Water/Well () Wood/Pellet stove
- () Garage/Storage shed over 144 sq ft () Re-Roof () Demolition () Solar panel
- () Pool Above ground/ In ground Size _____ () Heating appliance/Water Heater
- () Siding/Replacement windows () Deck *****DETAILED DRAWING IS REQUIRED FOR ALL DECK PROJECTS*****

CONTRACTOR INFORMATION:
CONTRACTOR NAME _____
ADDRESS _____
PHONE _____
INSURANCE:
LIABILITY INSURANCE _____ WORKERS COMP CARRIER _____
Is the Contractor Worker's Comp Exempt? If yes, ***CE-200 exemption form IS required***
CONTRACTOR RESPONSIBLE FOR PROVIDING PROOF OF INSURANCE COVERAGE

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REQUIRED DETAILS

- Stamped Plans
- Stamped Survey
- D.E.C. Approval
- Approved Site Plan from "Town Planning Board"
- A.P.A. Approval Letter
- Drawings (project is under state requirement)***

ESTIMATED COST OF PROJECT _____

DESCRIPTION OF PROJECT

Please provide a separate drawing of this parcel with dimensions, all property lines with set-backs, existing and proposed structures with dimensions, water well, septic system, driveways, roads, streams and any other relevant item.

Trusses **MUST** be engineered
 Septic Systems **MUST** be engineered
 Stamped plans **REQUIRED** for new construction over 1500 sq ft and for additions creating a home over 1500 sq ft

A permit will be issued when the application has been determined to be complete. The Applicant shall notify the Code Enforcement Officer of any changes of information contained in this application during enforcement of the permit. A building permit may be suspended or revoked if the work to which it pertains does not conform to the Uniform Building Code or Town of Johnstown Zoning Ordinance. Applicant/Owner gives the Code Enforcement Officer or Assessor permission to enter the project site for inspections during business hours. A 24 hour notice is requested for scheduled inspections. **PERMITS WILL EXPIRE AFTER 1 YEAR UNLESS RENEWED AT 1/2 OF ORIGINAL FEE.**

ELECTRICAL INSPECTIONS ARE REQUIRED FOR ANY ELECTRICAL ALTERATIONS AND A FINAL INSPECTION CERTIFICATE IS REQUIRED. EVERY INSPECTION IS IMPORTANT AND MUST BE SCHEDULED AND COMPLETED AS REQUESTED. FAILURE TO COMPLY MAY RESULT IN THIS PERMIT BEING SUSPENDED OR REVOKED.

THIRD PARTY BLOWER DOOR TEST IS REQUIRED.

I HEREBY CERTIFY THAT I HAVE READ THE INSTRUCTIONS AND EXAMINED THIS APPLICATION. ALL PROVISIONS OF NY STATE UNIFORM BUILDING CODE AND THE TOWN OF JOHNSTOWN ZONING ORDINANCE COVERING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT.

OWNER/AUTHORIZED AGENT/CONTRACTOR

Applicant Name (please print) _____

Applicant Signature _____ Date _____

TOWN OF JOHNSTOWN

BUILDING PERMIT APPLICATION

Footings

Size _____

Depth below grade _____

Foundation/Piers

Height/Depth _____

Width/Diameter _____

Type _____

Slab

Type _____

Thickness _____

Wire mesh _____

Re-bar pattern _____

Bearing Beams & Posts

Size/Type _____

Length _____

of Columns/posts _____

Rafters/Trusses*

Size _____

Span _____

Spacing _____

Floor Joist

Size _____

Span _____

Spacing _____

Roofing

Shingles _____

Metal _____

Ice & Water

Type _____ Amount _____

Underlayment _____

Flashing _____

Heating (new)

Type _____

Installer _____

Secondary source _____

Please attach window and door schedule (Bedroom must meet Egress specs, 5.7 sq ft)

Please provide Energy Code Specs. REScheck Current International Residential Code Zone 6

Third Party final electrical inspection certificate required

Blower door test certificate required

Manual J required

*Truss specifications must be provided and have a NYS Licensed Engineer's seal.

(50 lb ground snow load)