



# VILLAGE OF BALDWINSVILLE

## Codes Enforcement Office



16 West Genesee Street  
Baldwinsville, NY 13027

Phone # (315) 635-2481 ~ Fax # (315) 635-9231

### COMMERCIAL BUILDING PERMIT

<i>DO NOT WRITE IN THIS AREA - FOR OFFICE USE ONLY</i>		PERMIT #
Date Submitted:	Zoning District:	Water Fees:
Date Approved:	Tax Map #:	Sewer Fees:
Date Denied:	Zone Class:	Tree Fees:
Approved By:	Receipt/Check #:	Permit Fee:

The application process and building permit are subject to the conditions printed on the back. The Applicant is admonished to read the conditions on the back carefully. All permits issued by the Code Enforcement Office are strictly subject to the Zoning and Building Codes of the Village of Baldwinsville and the New York State Uniform Codes applicable on the date of this application. **NO ERROR OR OMISSION IN THE ISSUANCE OF A PERMIT SHALL LEGALIZE ANY CONSTRUCTION OR USE OTHERWISE PROHIBITED BY LAW.**

**Address of Permit Activity:**

Street Address: \_\_\_\_\_ City: Baldwinsville State: NY Zip Code: 13027

**Owner's Information:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Corp. Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Applicant Information (if different than owner):**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Corp. Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Nature of Work (ex: new building, addition, etc.) \_\_\_\_\_  
\_\_\_\_\_

Detailed Description of Proposed Project: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Estimated Value (\$) of all work, materials & labor of the proposed work: \$ \_\_\_\_\_

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## REQUIREMENTS FOR A COMMERCIAL BUILDING PERMIT

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- Survey of existing property (2 copies)
- Proposed Site Plan (2 Copies) to include:
  - a. Zoning data (including FAR) – Allowed-Existing-Proposed
  - b. Percentage of lot coverage – Allowed-Existing-Proposed
  - c. Setbacks to all property lines
  - d. Locations of trees within property to be removed
  - e. Topography of site if over 10% change to grade
  - f. Floor area – Allowed-Existing-Proposed
  - g. Elevations
- Construction drawings (2 copies) – Site plan and Zoning data must be on Page 1. Submit all necessary plans, elevations, sections and details. “Boiler Plates” that do not apply are not allowed or accepted.
- Must provide: Certificate of Insurance, General Liability, Workman’s Compensation, NY Disability – listing Village of Baldwinsville as additionally insured and certificate holder for the duration of the project.
- SWPPP (Stormwater Pollution Protection Plan) (if applicable)
- Compliance to Chapter 189 Flood Damage Prevention (if applicable)
- Plumbing Permit and Final Approval issued by Onondaga County (if applicable), must be submitted prior to issuance of Certificate of Occupancy or Compliance
- Electrical Permit and Final Approval from an approved Electrical Inspection Agency (if applicable), must be submitted prior to issuance of Certificate of Occupancy or Compliance
- Street Opening Permit (if applicable)
- Approved permits from all other Federal, State and Local agencies having jurisdiction
- Permit Fee: \$150.00 up to 1st \$1000.00, \$8.00 per \$1000.00 after - Valid for 12 months

**Contractor:** Business/Corporate Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle Initial: \_\_\_\_ Lic. Number: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**Architect/Engineer:** Business/Corporate Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle Initial: \_\_\_\_ Lic. Number: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**Plumber:** Business/Corporate Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle Initial: \_\_\_\_ Lic. Number: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**Electrician:** Business/Corporate Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle Initial: \_\_\_\_ Lic. Number: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**OWNER'S AUTHORIZATION**

I (we) hereby certify that:

- 1] I (we) agree to permit the Code Enforcement Officer and any officer or employee of the Village of Baldwinsville to enter upon the premises and/or to photograph in the discharge of their duties with this application.
- 2] Approved plans and a copy of the approved permit shall remain on the premises at all times until a Certificate of Occupancy / Completion / is issued. These plans will be made available to the Code Enforcement Officer/ Inspector upon request.
- 3] The Code Enforcement Officer/ Inspector shall be given a minimum twenty-four (24) hour notice to make the required inspection and no work shall continue until such inspection has been completed and approved.
- 4] The owner or his representative shall be responsible to arrange for all required inspections and to renew all permits **prior to** expiration of same.
- 5] The owner shall be responsible for the presence of the appropriate representative for the required inspection as directed by the Code Enforcement Officer/ Inspector.
- 7] Permit shall expire six (6) months from the date of issuance unless approved construction is in progress. No work is to be started until permit has been received and posted by the owner/applicant. Commencement of any work prior to the receipt and posting of the permit may result in penalties, pursuant to Chapter 138 of the Code of the Village of Baldwinsville. This permit expires 12 months after the date of issuance.
- 8] **It is the responsibility of the owner/applicant to submit plans and applications to the Village of Baldwinsville in compliance with all State and local laws.**
- 9] The owner and/or contractor shall notify the Code Enforcement Officer immediately of any change or deviation from the approved plans occurring during the course of work.

\_\_\_\_\_ Please print – property in name of \_\_\_\_\_

Deposes and says that he/she resides at \_\_\_\_\_  
(mailing address of owner)

in the State of \_\_\_\_\_, that he/she is the owner in fee of all certain lots, parcels of land shown on the attached survey Tax Map Number \_\_\_\_\_, situated, lying and being within the incorporated area of the Village of Baldwinsville; that I/We have read and understand items one (1) through twelve (12) as herein stated, that the work to be done upon the premises shall be done in accordance with the approved application and accompanying plans of which he/she is totally familiar; And that he/she hereby names \_\_\_\_\_ as his/her representative to file this application on his/her behalf.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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***For Official use only***

- Zoning Approval **DATE OF APPROVAL** \_\_\_\_\_
- Planning Board Approval **DATE OF APPROVAL** \_\_\_\_\_
- Architectural Review Board Approval **DATE OF APPROVAL** \_\_\_\_\_

- |  |   |
|--|---|
| <input type="checkbox"/> Survey                | <input type="checkbox"/> Liability/Comp insurance |
| <input type="checkbox"/> Site Plan             | <input type="checkbox"/> Flood Zone               |
| <input type="checkbox"/> Construction drawing  | <input type="checkbox"/> SWPPP                    |
| <input type="checkbox"/> Street opening Permit |   |