



**Town of Livingston  
Building Inspector  
Code Enforcement Officer  
James W. Trapp  
P.O. Box 67  
Livingston, New York 12541  
(518) 851 9441 x 314**

### Office Hours

**Tuesday & Thursday 6pm-8pm      Saturday 10am-12pm**

### Application for Building Permit

**Please fill out form and send it back to the above address or drop it off to my office. Also enclose a check made out to the "Town of Livingston". Below is the fee schedule.**

Residential Building	.30/s.f.; \$100 minimum
Deck Permit	.25/s.f.; \$50 minimum
Commercial Building	.50/s.f.
Shed/Gazebo	\$25.00 (<144 s.f.)
Residential Demolition	\$125.00
Pool	\$175.00
Fence	\$20.00
Solar Arrays	.25/s.f.
Generator	\$50 no structure/ \$100 with structure
Outdoor Wood Boiler	\$25.00
Sprinkler	.15/s.f.; \$100 minimum

### Contact Schedule

Please contact this office when **each** of the below named items have been completed.

- 1) Footing
- 2) Foundation/ Water Proofing
- 3) Framing
- 4) Plumbing
- 5) Insulation
- 6) Drywall
- 7) Final Inspection

Additional Information Needed

1. Deed to property
2. Two copies of scaled drawings showing all details of construction and related footings, cross sections and floor plans. Only detailed drawings will be accepted and may be required to be submitted by a licensed design professional upon review of the Code Official. All applicable building codes must be adhered to from the N.Y.S. Residential and Building Code.
  - A. Cross sections specifically drawn with materials to be used
  - B. Floor plans showing use of all rooms
  - C. Ceiling heights and projections
  - D. Window/Door clear opening sizes
  - E. Building/Structure elevations
  - F. Rafter/Joist/Header spans and sizes
  - G. Insulation values
  - H. Smoke/Carbon Dioxide detector placement
  - I. Plumbing/Mechanical details
3. Plot Plan Sheet provided must be filled out showing all sizes and setbacks of structure.
4. Any increase in bedrooms will require approval from the Board of Health, if septic is currently used

\*Take Note\*

**If you are installing an alarm system, it MUST be registered in the Town, please contact this office for details.**



# Application for Building Permit Town of Livingston

Date \_\_\_/\_\_\_/\_\_\_                      Permit #: \_\_\_\_\_  
Approved \_\_\_\_\_ Denied \_\_\_\_\_                      Reviewed By: \_\_\_\_\_  
Referred To: \_\_\_\_\_                      Fee Paid: \$ \_\_\_\_\_

A permit must be obtained before beginning construction. No inspection will be made until applicant has received a valid building permit. Please answer all of the following.

Owner of property: \_\_\_\_\_

P.O. Address \_\_\_\_\_

Property location: \_\_\_\_\_

Phone Number \_\_\_-\_\_\_-\_\_\_                      Tax Map # \_\_\_\_\_

Subdivision Name (If applicable): \_\_\_\_\_ Lot No. \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Address of Applicant: \_\_\_\_\_

Phone Number: \_\_\_-\_\_\_-\_\_\_

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\*\*The person responsible for supervision of work as regards to building codes\*\*

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

Address: \_\_\_\_\_

Phone Number: \_\_\_-\_\_\_-\_\_\_

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Nature of Proposed Work (check ONE):  
\_\_\_\_ Construction of new building  
\_\_\_\_ Addition to existing building  
\_\_\_\_ Alteration to existing building (no change to exterior dimensions)  
\_\_\_\_ Other work (Describe): \_\_\_\_\_

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Total Floor Area of Proposed Structure: \_\_\_\_\_ Sq. Ft.  
Size of New Structure \_\_\_\_\_ Ft. x \_\_\_\_\_ Ft.

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Foundation (Circle One): Pier Slab Crawl Partial Full

Foundation Wall Material \_\_\_\_\_

Foundation Wall Footing Size: \_\_\_\_\_" x \_\_\_\_\_"

Foundation Wall Thickness: \_\_\_\_\_ Ft. Height: \_\_\_\_\_ Ft.

Total depth below grade: \_\_\_\_\_ Ft.

Characteristics of Building (Check One):

\_\_\_\_ Wood Frame

\_\_\_\_ Steel

\_\_\_\_ Brick

\_\_\_\_ Concrete

\_\_\_\_ Stone

Primary Heating System (Check One):

\_\_\_\_ Electric

\_\_\_\_ Oil

\_\_\_\_ Gas

\_\_\_\_ Other (describe) \_\_\_\_\_

Fireplace to be installed: Yes \_\_\_\_ No \_\_\_\_ N/A \_\_\_\_

Approximate Value of Proposed Construction: \$ \_\_\_\_\_

Zoning Information:

Size of property: \_\_\_\_\_ Ft. x \_\_\_\_\_ Ft.

Number of Acres: \_\_\_\_\_

Number of Existing Buildings on Property: \_\_\_\_\_

Use of existing buildings: \_\_\_\_\_

Proposed Building-Distance from property line

Front Yard \_\_\_\_\_ Ft.

Rear Yard \_\_\_\_\_ Ft.

Side Yard \_\_\_\_\_ Ft.

Side Yard \_\_\_\_\_ Ft.

Occupancy Information (Check One):

\_\_\_\_ One Family Dwelling \_\_\_\_ Two Family Dwelling \_\_\_\_ Multi Family Dwelling

Number of Units \_\_\_\_\_ Business \_\_\_\_ Industrial \_\_\_\_ Other (Describe)

If addition, what will use be: \_\_\_\_\_

Accessory Building:

Attached garage

Detached garage

One/Two Car

Private storage building

Other (describe) \_\_\_\_\_

What zoning district is proposed project located in? (check one)

C-1

CH-2

HDR-2

LDR-2

AD/LI-1

CON-7

LC-1

Will project be a change of use when completed?  Yes  No  N/A

Name of Architect/Engineer: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Name of Contractor/Builder: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Name of Plumber: \_\_\_\_\_

Address: \_\_\_\_\_ Phone No.: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Name of Mason: \_\_\_\_\_

Address: \_\_\_\_\_ Phone No.: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Name of Electrician: \_\_\_\_\_

Address: \_\_\_\_\_ Phone No.: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

**\*\*PLEASE READ INFORMATION BELOW COMPLETELY\*\***

One (1) set of plans and specifications for the proposed work shall be enclosed with the application and those plans and specifications shall be in accordance with the State Education Law, Sections 7307 and 7209. This law requires that the seal and signature for all farm buildings, residential buildings of under 1500 gross sq. ft. or for alterations costing under ten thousand dollars (\$10,000.00). (The applicant may request that the requirement of plans and specifications be waived where the work to be done involves minor alterations or are otherwise unnecessary.)

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**\*\*ONE (1) PLOT PLAN MUST BE PREPARED AND SUBMITTED, drawn reasonably to scale, and attached hereto, showing clearly and distinctly all buildings, whether existing or proposed and indicate all setback dimensions from property lines. Show location of water supply and location and configuration of septic disposal area.\*\***

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**\*\*DECLARATION\*\***

To the best of my knowledge and belief the statements contained in this application, together with the plans and specifications, are a true and complete statement of all proposed work to be done on the described premises and that all provisions of the New York State Fire Prevention and Building code, the Town of Livingston Zoning Laws, and all other laws pertaining to the proposed work shall be completed with, whether specified of not, and that such work is authorized by the owner.

(Must be signed by applicant, or application is invalid)

Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Reviewed by Code Enforcement Officer/Building Inspector:

Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Special conditions of permit: \_\_\_\_\_

\_\_\_\_\_

By: \_\_\_\_\_  
Code Enforcement Officer/Building Inspector