

TOWN OF BARRINGTON
BUILDING AND ZONING APPLICATION

4424 BATH RD. PENN YAN, N.Y. 14527 PHONE 607-243-5323

FAX. 607-243-7053 INSPECTIONS/QUESTIONS 607-760-4804

APPLICATION IS BEING MADE FOR A:

() Building Permit, () Variance/Special Use** () Septic System permit**
() Site Plan** () Subdivision** () Other _____ (** additional forms)

Name of Owner _____ Date _____

Site Address _____ Phone# _____

CONTRACTOR/Applicant: _____ **PHONE:** _____

Address _____

ALL APPLICANTS MUST PROVIDE INSURANCE OR WAIVER FORM

INSURANCE: () WORKMAN'S COMP () LIABILITY () EXEMPTION FORM CE-200

Zoning District _____ Present use of property: _____

Description of proposed improvements and/or use: _____

Size of improvement: _____' x _____' = SQ. FT. _____' Height _____

Setbacks: front, _____ sides, _____ / _____ back, _____ **Estimated Cost, \$** _____

OWNER/CONTRACTOR

• **SIGN:** _____ **DATE:** _____

PERMIT # _____ FEE: \$ _____ CASH: _____ CHECK#: _____ int: _____

CODE ENFORCEMENT OFFICER: _____ DATE: _____

Required Site Plan Page 2

SITE PLAN, please draw site plan showing all roads, setbacks from right of ways and lot lines, driveways, existing and proposed structures and features (houses, garages, barns, sheds, septic tanks, wells, streams, lake) and north arrow.

The undersigned agrees that all proposed work or use to be done on the described premises are in compliance with the provisions of the NYS Fire Prevention and Building Code, the Town of Barrington Zoning Law, and all other laws, rules and regulations. The undersigned understands that the granting of any permit shall not be construed as adoption by the Town of Barrington of any plans, specifications or construction methods of permittee and the granting of any permit shall create no liability on the part of the Town. The undersigned hereby grants permission for the Code Enforcement Officer to enter the property and structure, as he deems necessary to inspect the same for compliance with applicable Codes and Laws.

APPROVED () NOT APPROVED () VARIANCE REQUESTED ()

OWNER / CONTRACTOR

• **SIGN** _____ **DATE** _____

CODE OFFICER _____ **DATE** _____