

## Instructions for Completing Building Permit Application

All requested information must be filled in on both the Application for Construction Inspection and the Construction Specifications. Use N/A to indicate "Not Applicable".

Include a site plan drawn to scale as closely as possible and submit it with application.

Permits may be mailed or dropped off at the Town Clerk's Office, 15 Water St., Cuba, NY 14727. Checks are payable to Cuba Town Clerk. Also include a self-addressed, stamped envelope for mailing the approved Building Permit.

Direct questions to Walter Putt at 716-378-7255.

TOWN OF CUBA  
BUILDING PERMIT FEES  
Schedule Adopted October 1, 2005  
Does not include electrical inspections

Up to \$2,000.....	\$78.00
\$2001 to \$25,000.....	\$78.00 for the first \$2,000 Plus \$4.50 for each additional \$1,000 or fraction thereof.
\$25,001 to \$50,000.....	\$170.00 for the first \$25,000 Plus \$3.50 for each additional \$1,000 or fraction thereof
\$50,001 to \$100,000.....	\$245.00 for the first \$50,000 Plus \$2.50 for each additional \$1,000 or fraction thereof.
\$100,001 to \$499,999.....	\$345.00 for the first \$100,000 Plus \$2.50 for each additional \$1,000 or fraction thereof.
\$500,000 And/or 4,000 Sq. Ft & Up.....	Determined by square footage @ 36 cents per square foot.
All inspections required for mobile home installations Excluding modular.....	\$125.00
Installation of above ground swimming pool.....	\$25.00
Installation of wood stove or similar unit.....	\$125.00
Chimney Inspections (New Construction).....	\$100.00

RENEWING building permits: In the event that a building permit must be renewed (original valid for one year), a fee equal to 50% of the original building permit fee will be charged prior to re-issuance. Building permits can be renewed three concurrent times only. At that expiration, application for a new building permit with associated fees will be instated.

Amended February 9, 2010

Roofing Permit Fee..... \$10.00

Amended November 2014

Oversize Windows, Doors, Prebuilt Sheds, Change of Use, Occupancy, Electrical Service, Manufactured Homes on Existing Pad in a Mobile Home Park.....\$25.00

**TOWN OF CUBA**  
15 WATER STREET CUBA, NY 14727  
**APPLICATION FOR CONSTRUCTION INSPECTION**  
Please Print or Type

Town of Cuba                      County of Allegany                      Permit Number \_\_\_\_\_

Name of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Job Site \_\_\_\_\_

Proposed Project \_\_\_\_\_

Name of Owner \_\_\_\_\_ Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_ Signature \_\_\_\_\_

\_\_\_\_\_ Zip \_\_\_\_\_

	<b>APPLICATION GUIDELINES</b>	
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- Detailed outline sheet must be submitted with application for any renovations, alterations or conversions
- Applicant is responsible for contacting inspector for applicable inspections
- Building permits are valid for one year upon issuance. Renewals are required, and fee will be applied.

Permit Issued On \_\_\_\_\_ Expires \_\_\_\_\_

Construction Value \_\_\_\_\_ Permit # \_\_\_\_\_

Fee Paid \$ \_\_\_\_\_ WR # \_\_\_\_\_

Check # \_\_\_\_\_ Money Order \_\_\_\_\_ Cash \_\_\_\_\_

**CHECK APPLICABLE ITEMS**

**NEW CONSTRUCTION**  
RESIDENTIAL/COMMERCIAL

**RENOVATION-ALTERATION-CONVERSION**  
RESIDENTIAL/COMMERCIAL

STICK BUILT HOME     DECK     ROOF     PORCH     GARAGE     POLE BARN

**INSTALLATION**

CHIMNEY CONSTRUCTION     SOLID FUEL BURNING DEVICE     INSERT     MOBILE HOME     MODULAR HOME  
 SWIMMING POOL

**Other** \_\_\_\_\_  **VISUAL SAFETY INSPECTION ONLY**  
RESIDENTIAL/COMMERCIAL

Review & Recommend Issuance, Inspector Signature \_\_\_\_\_ Date \_\_\_\_\_

Valid Upon Signature of Municipal Official \_\_\_\_\_ Date \_\_\_\_\_

**TOWN OF CUBA**  
15 WATER STREET CUBA NY 14727  
**CONSTRUCTION SPECIFICATIONS**

APPLICATION NO. \_\_\_\_\_ PERMIT NO. \_\_\_\_\_ DATE \_\_\_\_\_

INSTRUCTIONS: This form to be attached, when completed, to the application for construction inspection.

- a) This application must be filled in by typewriter or in ink and submitted to the clerk or inspector.
  - b) Plot plan showing location of lot and of buildings on premises, relationship to adjoining premises or public streets or areas, and giving a detailed description of layout of property must be drawn on the diagram which is part of this application.
  - c) This application must be accompanied by one set of specifications describing the nature of work to be performed, the materials and equipment to be used and installed and details of structural, mechanical, electrical and plumbing installations.
  - d) Upon approval of this application, the issuing inspector will issue a building permit to the applicant. Such permit shall be kept on the premises available for inspection throughout the progress of the work.
  - e) The work covered by this application may not be commenced before the issuance of a building permit.
  - f) No building shall be occupied or used in whole or in part for any purpose whatsoever until an application is made for a Certificate of Occupancy and shall have been granted by the inspector and issued by the municipality.
  - g) If this application is not filed by the owner, an affidavit must accompany it stating that the proposed construction is authorized and that the inspector shall be permitted to inspect the premises without the need of a search warrant.
1. State existing use and occupancy of premises and intended use and occupancy of proposed construction.
    - a) Existing use and occupancy \_\_\_\_\_
    - b) Intended use and occupancy \_\_\_\_\_
  2. Nature of work:  New Building  Addition  Alteration  Repair  Removal  Demolition  Installation  
 Mobile Home  Manufactured Home  Swimming Pool
  3. If dwelling, number of dwelling units \_\_\_\_\_, Number of dwelling units on each floor \_\_\_\_\_, If garage, number of cars \_\_\_\_\_.
  4. If business, commercial or mixed occupancy, specify nature and extent of each type of use \_\_\_\_\_
5. Dimensions of entire new construction: Front \_\_\_\_\_ Rear \_\_\_\_\_ Depth \_\_\_\_\_ Height \_\_\_\_\_ Stories \_\_\_\_\_
  6. Does proposed construction violate any ordinance or regulation? \_\_\_\_\_
  7.  Proof of Workers' Compensation Insurance  Affidavit of Exemption to show specific proof
  8. Name of Architect, if required \_\_\_\_\_ Phone \_\_\_\_\_  
Name of Contractor \_\_\_\_\_ Address \_\_\_\_\_
  9. Will there be electrical installation and/or alterations? If so, specify \_\_\_\_\_
  10. A plot diagram must be prepared and attached hereto and locate clearly and distinctly all buildings, whether existing or proposed, and indicate all set-back dimensions from property lines. Give lot and block numbers or description according to deed, and show street names and indicate whether interior or corner lot.

TOWN OF CUBA, COUNTY OF ALLEGANY, STATE OF NEW YORK --

(Applicant) \_\_\_\_\_ BEING DULY SWORN DEPOSES AND SAYS THAT HE/SHE IS THE APPLICANT ABOVE NAMED. He/she is the agent of said owner and is duly authorized to perform or have performed the said work and to make and file this application; that all statements contained in this application are true to the best of his knowledge and belief, and that the work will be performed in the manner set forth in the application and specification filed therewith, and in accordance with applicable laws, ordinances, rules and regulations.

Sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Cuba Town Clerk \_\_\_\_\_ Signature of Applicant \_\_\_\_\_

**AFFIDAVIT OF EXEMPTION TO SHOW SPECIFIC PROOF OF WORKERS' COMPENSATION INSURANCE COVERAGE FOR A 1, 2, 3, OR 4 FAMILY, OWNER-OCCUPIED RESIDENCE**

*This form cannot be used to waive the worker; compensation rights or obligations of any party.*

Under penalty of perjury, I certify that I am the owner of the 1, 2, 3, or 4 family, owner-occupied residence (including condominiums) listed on the building permit that I am applying for, and I am not required to show specific proof of workers; compensation insurance coverage for such residence because (please check the appropriate box):

- I am performing all the work for which the building permit was issued.
- I am not hiring, paying or compensation in any way, the individual(s) that is/are performing all the work for which the building permit was issued or helping me perform such work.
- I have a homeowner's insurance policy that is currently in effect and covers the property listed on the attached building permit AND am hiring or paying individuals a total of less than 40 hours per week (aggregate hours for all paid individuals on the jobsite) for which the building permit was issued.

I also agree to either:

- ❖ Acquire appropriate workers' compensation coverage and provide appropriate proof of that coverage on forms approved by the Chair of the NYS workers' Compensation Board to the government entity issuing the building permit if I need to hire or pay individuals a total of 40 hours or more per week (aggregate hours for all paid individuals on the jobsite) for work indicated on the building permit, or if appropriate, file a WC/DB-100 exemption form: OR
- ❖ Have the general contractor, performing the work on the 1, 2, 3, or 4 family, owner-occupied residence (including condominiums) listed on the building permit that I am applying for, provide appropriate proof of workers' compensation coverage or proof of exemption from that coverage on forms approved by the Chair of the NYS Workers; Compensation Board to the government entity issuing the building permit if the project takes a total of 40 hours or more per week ( aggregate hours for all paid individuals on the jobsite) for work indicated on the building permit.

\_\_\_\_\_  
Signature of Homeowner

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Homeowner's Name Printed

\_\_\_\_\_  
Telephone Number

Property Address that requires the building permit:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Insurance Co. _____
Policy No. _____
Expiration Date _____