

**TOWN OF CAMBRIDGE CODE ENFORCEMENT
BUILDING PERMIT**

INSTRUCTIONS FOR COMPLETING BUILDING PERMIT APPLICATION

1. Use typewriter or print in ink.
2. Answer all questions that apply.
3. Be sure to sign and date the application.
4. **Enclose two (2) sets of plans and specifications. Return the completed form to:**
Mr. H. LaVerne Davis
949 Turnpike Road
Cambridge, NY 12816
Tel. 518-677-2722
5. All applications must be filed, fees paid and approved by the Building Inspector 10 days prior to starting work.
6. All applications must be accompanied by working plans of the proposed project and specifications of materials to be used.
7. Septic system applications must be completed and submitted at the same time as the building permit application.
8. New residential construction plans submitted, 1500 square feet or above, must be signed and sealed by an architect or engineer licensed and approved by the State of New York.
9. No permit is required for a farm building used solely for agricultural purposes.
10. Construction progress must be reported to the Building Inspector so that inspection can be made.
11. All electrical work must have proof of third party inspection.
12. Please notify Highway Superintendent Alan Davis before installing a culvert.
518-677-3248 Town Garage
518-788-5857 Home

BUILDING PERMIT APPLICATION

FOR OFFICE USE ONLY	EXAMINER _____
APPLICATION NO. _____	DISAPPROVED: _____
EXAMINED _____	REASON (S) _____
APPROVED _____	_____
PERMIT NO. _____	_____

1. LOCATION OF PROPOSED PROJECT _____
(Address/street) (Town or Village)

2. APPLICANT _____ (Name)
 _____ (Address)
 _____ (Phone No.)

3. APPLICANT IS: Owner
 Lessee
 Agent
 Architect
 Engineer
 Builder

4. NAME AND ADDRESS OF OWNER _____
 _____ (Name)
 _____ (Address)

5. IF OWNER OR APPLICANT IS A CORPORATION, GIVE NAMES AND TITLES OF TWO OFFICERS:

_____ (Name) _____ (Title)
 _____ (Name) _____ (Title)

6. TYPE OF OCCUPANCY Single Family Dwelling Business
 Two Family Dwelling Mercantile
 Multiple Dwelling Industrial
 Permanent Occupancy Storage
 Transient Occupancy Assembly
 Senior Citizens Institutional
 Adult Residential Care

7. NATURE OF PROPOSED WORK Construction of a New Building
 Addition to a building
 Alteration to a building
 Demolition of a building
 Other work (describe) _____

BUILDING SPECIFICATIONS

Kind of construction: Wood frame, ect. _____

Material of foundation walls _____ Thickness _____

Footings _____ Size _____

Re-Enforcement _____ Size ect. _____

Will there be a cellar? _____

Type of roof _____ Material of roof _____

Size wood studs _____ "X _____ spacing _____ "O.C.

Size of floor joist, 1st floor _____ "X _____ spacing _____ "O.C.

Size of floor joist, 2nd floor _____ "X _____ spacing _____ "O.C.

Type of roof rafters _____ "X _____ spacing _____ "O.C.

Exterior finish _____

Interior finish _____

If garage is to be attached, of what material is wall between garage and main building to be constructed? _____

Is there to be an opening between the garage and building? _____

Kind of heating system? _____

Will a flue lined chimney be provided? _____ Size _____

Height of chimney above roof _____

Will there be a fireplace? _____ Flue size, ect. _____

Will there be auxiliary heat? _____ Type _____

Water supply _____

Septic system? _____ Size _____

ADDITIONAL SPECIFICATIONS AND REMARKS:

8. ESTIMIATED COST (All costs associated with proposed project, exclusive of land acquisition) \$ _____

9. PILOT PROGRAM (Locate clearly all buildings, whether existing or proposed; show street names and set back distances from property lines.)

10. APPLICATION IS HEREBY MADE to the Town of Cambridge Code Enforcement for the issuance of a Building Permit pursuant to the provisions of Local Law No. 3 of 1984, and the New York State Uniform Fire Prevention and Building Code. The applicant agrees to comply with all applicable provisions of said law and code as well as applicable local, county, or state laws and/or ordinances.

(applicant's name) (date) (applicant's signature)

**Town of Cambridge
Assessor's Office
844 County Route 59
Cambridge, NY 12816
(518) 677-3952**

New Construction Questionnaire

In order to insure accurate information on new construction in the Town of Cambridge, please answer the questions below and return as soon as possible.

Property Owners' Name _____
 Address _____
 Location of Construction _____
 Tax Map Number _____

Building Construction

Circle yes or no

Number of stories _____	In ground pool	yes	no
Number of Full bathrooms _____	Fireplace	yes	no
Number of ½ Baths _____	Central air	yes	no
Type of siding _____	Basement-Full _____		
Fuel type-Oil _____ Gas _____ Electric _____	Slab _____		
Hot Air _____ Hot Water _____ None _____	Crawl _____		
Number of Bedrooms _____			

Use of the building/addition -circle one

Residential
Business
Farm Building
Storage

Estimated cost of construction \$ _____

Size of the Building/Addition

Square feet of living area	_____	
Dimensions of Building	_____	(or provide copy of drawing)
Dimensions of Garage	_____	
Dimensions of porch or deck	_____	
Finished Basement area	_____	
Finished Attic area	_____	
Square feet of farm building	_____	
Square feet of storage building	_____	

Mobil Home Double _____ Single _____ year _____ size _____

Estimated Date of Completion _____

Please add any other information that you feel will be helpful in valuing this construction,

Thank you very much, your cooperation is greatly appreciated.