

**TOWN OF FARMINGTON**

**APPLICATION FOR BUILDING PERMIT (RESIDENTIAL USE ONLY FOR ROOFING & SIDING)**

Address of proposed job site: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Phone # \_\_\_\_\_

Property Owner's Name: \_\_\_\_\_

Property Owners Address: \_\_\_\_\_

Phone # \_\_\_\_\_

Contractor/Builder's Name: \_\_\_\_\_

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

Phone# \_\_\_\_\_

The applicant shall, as part of this application, agree to the following:

A) Notify **the Building Department of any changes** in the information contained in the application or approved plans & specifications

B) Notify the Building Department a minimum of 24 hours in advance for all required inspections and receive conformation before proceeding with any work.

C) Prominently display on the premises the building permit issued.

D) **WORK MAY NOT COMMENCE PRIOR TO THE ISSUANCE OF THE BUILDING PERMIT**

The Applicant understand that this acceptance does not relieve the agent, applicant, architect, builder, engineer or owner from complying with any of the provisions of the NYS Codes, local zoning or other regulatory agencies requirements, whether stated, implied or omitted in the plans and specifications as submitted for the building permit

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Value of Proposed Work \$ \_\_\_\_\_

This application must be completed by printing, typewriter or ink and submitted to the Building Department.

The application fee shall be based upon the Schedule of Fees and shall be paid prior to the release of the permit.

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**1) ROOF**

Nature of Work: Roof over \_\_\_\_\_ Tear off and re-shingle \_\_\_\_\_

Number of layers presently \_\_\_\_\_

Ice & Water Shield (2ft beyond inside of exterior wall minimum) \_\_\_\_\_

Shingle type & class \_\_\_\_\_

Roof pitch \_\_\_\_\_

Rafter size or truss \_\_\_\_\_

Rafter or truss spacing \_\_\_\_\_

Rafter span (exterior wall to ridge beam) \_\_\_\_\_

Ventilation \_\_\_\_\_

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**2) SIDING**

Type of siding \_\_\_\_\_ Tear off \_\_\_\_\_

Vapor barrier \_\_\_\_\_

Insulation \_\_\_\_\_

Underlay \_\_\_\_\_

R-value \_\_\_\_\_