

TOWN OF BALLSTON
SPECIFICATIONS FOR BUILDING PERMIT
(SHED, PORCH, AND GARAGE)

OWNER'S NAME _____ ADDRESS _____

TYPE OF CONSTRUCTION:

Use of Building _____ Zoning District _____

LOCATION:

Is Lot Abutting a Bonded or Accepted Street? Yes [] No []

Corner Lot? Yes [] No []

House No. & Street _____ Lot Size _____

Is structure to be used as a business? Yes [] No [] If yes, nature of business _____

BUILDING CONSTRUCTION: Size of Building _____ Total Square Feet _____

Number of Stories _____ Roof type _____

Size of Footings _____ Exterior wall stud size and spacing _____

Type and size of Foundation _____ Interior wall stud size and spacing _____

Size of Bearing Beams _____ Siding type _____

Size and spacing of Floor Joists _____ Is structure heated? _____

Size and spacing of Ceiling Joists _____ Heat type _____

Size and spacing of Roof Rafters _____ **Total Cost** _____

THE FOLLOWING MUST BE SUBMITTED WITH THIS APPLICATION:

1. PLOT PLAN SHOWING LOCATION OF STRUCTURE ON PROPERTY.
2. DRAWINGS OF STRUCTURE INCLUDING FLOOR PLAN AND SECTIONAL DRAWING

NOTE: NEW YORK STATE EDUCATION DEPARTMENT REGULATIONS REQUIRE THE STAMP OF A DESIGN PROFESSIONAL ON PLANS WHERE THE CONSTRUCTION VALUE EXCEEDS \$20,000.00 AND/OR WHERE THE SQUARE FOOTAGE EXCEEDS 1500 SQUARE FEET.

Owner _____ Phone _____

Contractor _____ Phone _____

Signature of Owner _____ Date _____

OFFICE USE

APPROVED BY _____ FEE _____ PERMIT NO. _____

DATE _____ SECTION _____ BLOCK _____ LOT _____

VARIANCE _____ SPECIAL USE PERMIT _____ SITE PLAN REVIEW _____

