

**TOWN OF FRANKFORT**  
**APPLICATION FOR BUILDING AND ZONING PERMIT**  
**CODES DEPARTMENT**  
**894-0922**

DATE \_\_\_\_\_ 20\_\_\_\_\_

PERMIT NO. \_\_\_\_\_  
C/O NO. \_\_\_\_\_

Application is hereby made to the Codes Department for the issuance of a Building and Zoning Permit pursuant to the N.Y.S. Uniform Fire Prevention & Building Code for the construction of buildings, additions or alterations. as herein described. The applicant or owner agrees to comply with all applicable laws, ordinances, regulations, and also will allow all inspectors to enter the premises for the required inspections.

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

Zoning District \_\_\_\_\_  
Lot Size \_\_\_\_\_ Area \_\_\_\_\_

Phone: \_\_\_\_\_

Existing Building Size \_\_\_\_\_

Email: \_\_\_\_\_

New Building Size \_\_\_\_\_

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

Deck Size \_\_\_\_\_

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

Estimated Cost \$ \_\_\_\_\_

Zip \_\_\_\_\_

Floor Area \_\_\_\_\_

Tax Map Number: \_\_\_\_\_

NEW BUILDING YARDS: \_\_\_\_\_ Feet \_\_\_\_\_

Existing Use of Property: \_\_\_\_\_

Front Yard Depth \_\_\_\_\_ Feet \_\_\_\_\_

Explain Proposed Use: \_\_\_\_\_

Right Side Yard Width \_\_\_\_\_ Feet \_\_\_\_\_

Contractor's Name: \_\_\_\_\_

Left Side Yard Width \_\_\_\_\_ Feet \_\_\_\_\_

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

Rear Yard Depth \_\_\_\_\_ Feet \_\_\_\_\_

Phone: \_\_\_\_\_

Bldg. Height \_\_\_\_\_ Feet \_\_\_\_\_ Stories \_\_\_\_\_

Name of Compensation or General Liability

Bldg. Permit Fee \$ \_\_\_\_\_

Carrier & Policy # \_\_\_\_\_

Deck Fee \$ \_\_\_\_\_

Plumbing Fee \$ \_\_\_\_\_

Septic System Fee \$ \_\_\_\_\_

TOTAL FEE \$ \_\_\_\_\_

**NOTE: Inspections by Codes Department are required at the following schedule. (You must call for Inspections.)**

1. Footings before pouring concrete.
2. Foundation inspection before back fill.
3. Plumbing, heating, framing and Electrical Inspections before any closing of the framework.
4. Insulation inspection.
5. When all work is completed, final inspections are required Electrical, Blower Door Cert., Plumbing and Walk through by Codes Department..

**NO OCCUPANCY OF THE BUILDING IS PERMITTED WITHOUT A CERTIFICATE OF  
OCCUPANCY ISSUED BY THE CODES DEPARTMENT.**

NOTE: THIS BUILDING PERMIT IF FOR RESIDENTIAL OR COMMERCIAL WORK EXPIRES ONE (1) YEAR FROM DATE ISSUED.

Signature of Owner , Applicant or Agent

Printed or Typed Copy of Signature

The application of \_\_\_\_\_ dated \_\_\_\_\_ 20\_\_\_\_\_ is hereby approved (disapproved) and permission granted (refused) for the construction, reconstruction or alteration of a building and / or accessory structure set forth above.

Reason for refusal of  
permit \_\_\_\_\_

Dated \_\_\_\_\_ 20\_\_\_\_\_

Codes Department Officer