

THE FOLLOWING ITEMS ARE  
REQUIRED PRIOR  
TO ANY BUILDING PERMIT ISSUED

A COMPLETE APPLICATION  
PLOT PLAN DRAWN TO SCALE  
**PROOF OF WORKMEN'S COMP. OR**  
**EXEMPTIONS**

COMPLETE PLAN SHOWING  
FOUNDATIONS, WALLS, ROOF,  
INSULATION, ETC. AS REQUIRED

**NO PERMIT WILL BE ISSUED OR WORK**  
**STARTED UNTIL ALL OF THE ABOVE**  
**ARE SUPPLIED**



# Village of Champlain

1104 Route 9 (Main Street), Champlain, NY 12919

Tel.: 518-298-4152

Fax: 518-298-2075

## APPLICATION FOR BUILDING/ZONING PERMIT

### For Office Use Only

Permit Number: \_\_\_\_\_ Permit Fee: \_\_\_\_\_ Date Received: \_\_\_\_\_

Approvals Needed: \_\_\_\_\_ Zoning Board of Appeals \_\_\_\_\_ Water Service  
\_\_\_\_\_ Village Planning Board \_\_\_\_\_ Sewer Service  
\_\_\_\_\_ County Planning Board

Date of Approval: \_\_\_\_\_  
\_\_\_\_\_  
(Signature of Code Officer)

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

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

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

2) Location of property: \_\_\_\_\_

3) Tax Map Identification # \_\_\_\_\_

4) Name of Zoning District (as shown on Village Zoning Map): \_\_\_\_\_

5) Application is for: \_\_\_\_\_ Construct a building or structure  
\_\_\_\_\_ Single mobile home  
\_\_\_\_\_ Double-wide  
\_\_\_\_\_ Extend or after a building or structure  
\_\_\_\_\_ Repair a building or structure  
\_\_\_\_\_ Demolition of a building or structure  
\_\_\_\_\_ Other: \_\_\_\_\_

6) Existing use of site (i.e., residential, commercial, etc.): \_\_\_\_\_

7) Attach a copy of a layout or plan drawn to scale showing the dimensions of the lot, and exact location of all buildings, structures, driveways, casements.

8) Describe the proposal, including all buildings, type of construction and uses of land:

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9) Dimensions of all proposed buildings: \_\_\_\_\_

10) Distance from buildings to lot boundaries must be visible surveyor stakes (front property line is measured from the edge of the pavement)

Front: \_\_\_\_\_  
Rear: \_\_\_\_\_

Side: \_\_\_\_\_  
Side: \_\_\_\_\_

11) Height of A existing buildings and structures: \_\_\_\_\_

12) Number of family units (for residential structures): \_\_\_\_\_

13) If a mobile home, date of manufacture: \_\_\_\_\_

14) Estimated cost of construction: \_\_\_\_\_

15) Signed & sealed plans by: \_\_\_\_\_

16) Name of Contractor & Phone Number: \_\_\_\_\_

17) Construction startup date: \_\_\_\_\_

\_\_\_\_\_  
(Signature of Applicant)

\_\_\_\_\_  
Date