

VILLAGE OF SKANEATELES 26 Fennell St. Skaneateles, NY 13152 315-685-2118

| or Office Use Only |  |
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| ee.                |  |

Check #: Date paid: Permit #:

## APPLICATION FOR PERMIT FOR WORK IN PUBLIC RIGHT-OF-WAY

| PROJECT ADDRESSPROPERTY OWNER                  |  |
|--|--|
| EMAIL ADDRESS                                  |  |
| DESCRIPTION OF WORK TO BE DONE                 |  |
| DETAILS AS APPLICABLE  STYLE OF OF INFRA       | N/DIMENSIONS OF DIGGING; HEIGHT OF SCAFFOLDING (FEET); WIDTH OF SCAFFOLDING;<br>LIFT (BOOM, SCISSOR, ETC), IF ANY; SIZE OF LIFT IF APPLICABLE (E.G., 40 FEET, 60 FEET); TYPI<br>STRUCTURE WORK (WATER/SEWER/GAS/ELECTRIC/STORMWATER) |
| DRAWING/ SKETCH OF WORK PLAN (ATTACH ADDITION  | ONAL PAGES, PHOTOS OR PLANS AS NECESSARY):   |
|  |  |
| CONTRACTOR / AGENT INFORMATION:                |  |
| [ ]CONTRACTOR* [ ]ARCHITECT [ ]LLC MGR         |  |
| NAME<br>PHONE #                                |  |
| EMAIL ADRESS                                   |  |
| *Workmans Comp and Liability Insurance Musi    | t Be Included  |
| INSPECTIONS REQUIRED:                          |  |
| Inspection(s) by the Village shall occur upon: |  |
| 1) Setup of scaffolding                        | 3) Before digging  |
| 2) Commencement of lift operation              | 4) Prior to backfill of any excavation   |
| CHECKLIST ITEMS: [ ] LAND SURVEY and/or A      | AS-BUILT SURVEY [ ] BUILDING PERMIT AND/OR HLPC CERTIFICATE*   |
| [ ] TOPO MAPS and/or UT                        | ILITY MAPPPING [ ] METER HOOD/ DUMPSTER APPROVAL * *If necessary   |

It is your responsibility to call for inspections. Code Enforcement Office must be notified when work is complete.

## TIME LIMITS:

A SCAFFOLDING PERMIT SHALL BECOME INVALID IF AUTHORIZED WORK IS NOT COMMENCED WITHIN THE ALLOTTED TIME FOLLOWING DATE OF ISSUE. BUILDING PERMIT EXPIRATION MAY BE EXTENDED BY WRITTEN PERMISSION.

## **CERTIFICATIONS:**

- I AM THE [ ] OWNER [ ] CONTRACTOR [ ] AGENT OF OWNER AND AM AUTHORIZED TO MAKE THIS APPLICATION.
- I AUTHORIZE THE VILLAGE TO MAKE INSPECTIONS AS PRESCRIBED UNDER LOCAL AND STATE LAWS.
- I WILL NOTIFY THE CODE ENFORCEMENT OFFICE IMMEDIATELY OF ANY CHANGES DURING THE COURSE OF THE WORK.
- I WILL NOTIFY THE CODE ENFORCEMENT OFFICE WHEN INSPECTIONS ARE DUE.
- I WILL ABIDE BY THE REGULATIONS AND RESTRICTIONS AS SET FORTH BY THE VILLAGE AND ALL WORK SHALL BE IN COMPLIANCE WITH THE NEW YORK STATE UNIFORM FIRE PREVENTION AND BUILDING CODE.

| SIGNED _            |                   |                | DATE OF COMPLETED APPLICATION  | ON NC      |  |  |  |
|---------------------|-------------------|----------------|--|------------|--|--|--|
|                     |                   |                |  |            |  |  |  |
|                     |                   |                |  |            |  |  |  |
|                     |                   |                |  |            |  |  |  |
|                     |                   |                | avit of Owner or Applicant or Agent<br>f application is not made by the proper | ty owner)  |  |  |  |
|                     | STATE OF NEW YORK | ) SS:          | r application is not made by the proper  | ty owner,  |  |  |  |
|                     | COUNTY OF ONONDAG | ,              |  |            |  |  |  |
|                     |                   | On this day of | , 20; personally appeared  | before me. |  |  |  |
|                     |                   |                | NOTARY PUBLIC  | _          |  |  |  |
| For Office Use Only |                   |                |  |            |  |  |  |
|                     | Application State | ıs:            | Approved   | Denied     |  |  |  |

**NOTES**