



CITY OF DUNKIRK
Housing, Building and Zoning Officer
 City Hall, Dunkirk, New York 14048
www.dunkirktoday.com

Application No. _____

By Official: _____

WILFRED ROSAS
 MAYOR
 (716) 366-9882
 FAX (716) 366-2049

HOUSING, BUILDING & ZONING OFFICE
 (716)366-9858
 FAX (716)363-6481

APPLICATION FOR PERMISSION TO BUILD

(Instructions on last page)

Please submit one of the following along with your application:
 Copy of Survey Site Plan Drawings by Licensed Architect/Engineer Floor Plan

Project Information

Address: _____
 Tax Map Number: Section _____ Block _____ Lot _____
 Current use: _____

Owner Information

Owner's Name: _____
 Full Address: _____
 Phone Number: _____ Mobile: _____
 Email: _____

Contractor Information

Name: _____
 Full Address _____
 Phone Number: _____ Mobile: _____
 Email: _____

Insurance Certificates On file Enclosed Will submit

*Proof exemption (CE-200,BP-1) and/or proof of NYS Worker's Compensation/Disability and Liability required for permit approval. Certificate holder "City of Dunkirk, 342 Central Ave., Dunkirk, NY 14048"

Designer Information (NYS Licensed Architect/Engineer)

Name: _____
 Full Address _____
 Phone Number: _____ Mobile: _____
 Email: _____

Proposed Work

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Roof/Re-roof | <input type="checkbox"/> Addition-Garage | <input type="checkbox"/> Tower/Antenna |
| <input type="checkbox"/> Renovation | <input type="checkbox"/> Foundation Repair | <input type="checkbox"/> Addition-Deck/Porch | <input type="checkbox"/> Fire Sprinkler |
| <input type="checkbox"/> Alteration | <input type="checkbox"/> Addition - _____ | <input type="checkbox"/> In-ground Pool | <input type="checkbox"/> Fireplace/Stove |
| <input type="checkbox"/> Repair | <input type="checkbox"/> Addition - Shed | <input type="checkbox"/> Sign (<input type="checkbox"/> Temporary) | <input type="checkbox"/> Other: _____ |

Project Description

Building Definition: Residential Mercantile Commercial Industrial Mixed Use

Building Area (sqft) _____ Building Height (ft) _____ # of Stories _____
Cost of Construction: _____

Zoning District (City Code – Chapter 79)

- R-1 Single Family
- R-2 General Residential
- R-3 Multi Family
- C-1 Tourism Commercial

- C-2 Community Business
- CBD Central Business
- M-1 Light Industrial
- M-2 General Industrial

Overlay District (if applicable)

- O-S Open Space
- U-R Urban Renewal
- H-1 Central Harbor Front
- H-2 Harbor Front Historic
- H-D Historic

Local, State & Federal Compliance (where applicable)

- Served by Municipal Sewer
- Served by Municipal Water
- Curb Cut Required
- Historical (NYS Designated)
- Flood Zone
- DEC Coastal Erosion Zone
- State/Federal Wetland
- Chautauqua County Health Department

This application is hereby made to the Building and Zoning Officer of the City of Dunkirk for the issuance of a building permit pursuant to the New York State Uniform Fire Prevention and Building Code (19NYCRR) 2015 ICC family of building codes (including any supplements), for the construction, alteration, additions, repairs, removal, or changes in the type of occupancy or use of the structure or use as described above. The applicant agrees to comply with all the applicable laws, ordinances and regulations. The applicant states that he is the owner, agent, or representative of said owner(s); that he is duly authorized to perform or have performed the said work and to make and file this application; that all statements made in this application are true to the best of his knowledge and belief; and that the work will be performed in the manner set forth in this application and the NYS UFPB Code applicable to the proposed structure. In addition, application is hereby made for the issuance of a Certificate of Occupancy for the structure(s) or use(s) as described above. The applicant certifies that upon completion of the work upon the structure described above he will notify the Building and Zoning Officer so that the officer can or cause to be made a final inspection of the structure prior to issuing the Certificate of Occupancy. No structure or use for which a building permit has been issued shall be occupied or used in whole or part upon completion for any purpose until a Certificate of Occupancy shall have been granted by the Building and Zoning Officer.

Applicant Signature _____

Date _____

INSTRUCTIONS

This application shall be completed by typing or writing and must be submitted to the Building and Zoning Officer of the City of Dunkirk as follows (additional information may be required):

- In person
- Mail
- Fax: 716-363-6481
- Email to: building@cityofdunkirk.com

OFFICE USE ONLY

- Approved IPS Application No. _____ Fee: _____
- Denied - Special approval required by:
- Zoning Board for: Area Variance Special Use
- Planning Board Harbor Commission Common Council

RESIDENTIAL RE-ROOFING WORKSHEET

Project Address: _____

1. Are existing roofing materials being removed? YES NO - Number of layers to remain.
If NO, describe condition of existing materials: _____

2. Existing roof structure: Truss Rafter Other: _____ Pitch: _____

3. Structure Type: Main Building Main Building & Attached Garage Detached Garage Accessory

4. Is the existing roof structurally sound? YES NO - Rafters, trusses, plywood, etc., are in need of repair or replacement.

5. Are you making any structural changes (replacement of sheathing, rafters, trusses, etc.)? YES NO
If yes, describe the structural changes to the roof system. _____

(Please note: Drawings of structural details may be required to be submitted for review and approval.)

6. Type of roof material:

Removing:

Asphalt Shingle

Roll Roofing

Metal/Copper

Membrane

Slate/Tile

Other

New Materials:

Asphalt Shingle - Type: _____

Roll Roofing - Type: _____

Metal/Copper - Type: _____ Gauge (Thickness) _____

Membrane - Type: _____

Slate/Tile - Type: _____

Other - Type: _____

Manufacturer: _____

7. Method of Fastening:

Nails Screws Size/Length: _____ Spacing: _____

Other. Describe: _____

8. Type of Underlayment: (Check all that apply)

Ice & Water Shield. Describe location, amount (width/rows) being installed: _____

Felt Synthetic Felt Other: _____

Describe location installed: _____

9. Purlins installed? YES NO Size: _____ Spacing: _____

If purlins are being installed, please explain how they will be attached to the existing roof (i.e. nail size, number of nails, structural screw, size of structural screw, spacing, etc.): _____

10. Flashing

Will existing flashing materials be reused? YES NO

Will new flashing materials be installed? YES NO

If yes, describe how new flashing will be installed or how existing flashing will be integrated into new roofing materials: _____

Note: Flashing materials must be installed under siding. Flashing installed over siding will not be approved.

11. Roof Penetrations Existing / Proposed: (Check all that apply)

* Plumbing Stack Vent. Flashing Method: _____

* Exhaust/Combustion Vent.. Flashing Method: _____

* Masonry Chimney/Fireplace. Flashing Method: _____

* Combustion Vent. Flashing Method: _____

* Skylight. Flashing Method: _____

Ridge Vent

Static/Louver Vent

Turbine Vent

* Power Vent

*Installation of new components associated with the installation of new equipment may require separate building permit if not existing prior to re-roof.

12. Check if provided:

Manufacturers installation instructions for roofing and underlayment