



Town of Gates

1605 Buffalo Road, Rochester, NY 14624
Ph: (585) 247-6100 Fax: (585) 426-8581

Date Application Recv'd _____

BUILDING PERMIT APPLICATION

1. Property Information:

Property Address: _____

Parcel ID # (for new builds) _____

Business Occupant Name: (For Commercial Properties only) _____

2. Contacts:

Who owns this property?: (Whoever is listed on the property deed)

Owner: _____

Address: _____

Phone#: _____

Email: _____

Applicant: (If not the owner, submit written permission from owner)

Contact Name: _____

Address: _____

Phone#: _____

Email: _____

Who is the best contact to discuss questions about project? (Name and phone number)

3. Who is Performing the Work?

☐ **Owner, Friend or Family:** Owner must complete CE-200 form

☐ **Contractor:** Submit General Liability & Worker's Comp. Insurance

Company _____

Name _____ Phone# _____

Address _____

☐ **Contractor without Worker's Comp.:** Need General Liability & CE-200 form

☐ **Plumber:** General Liability & Worker's Comp. Insurance or CE-200

Company _____

Name _____ Phone# _____

Address _____

4. Estimated Cost of Construction:

5. Type of Permit:

<input type="radio"/> Addition:	<input type="radio"/> Generator: KW: _____ Make/Model: _____
<input type="radio"/> Alteration: Provide photos of current area plus proposed plans of project including measurements	<input type="radio"/> Hot Tub: Make & Model _____
<input type="radio"/> Deck: Is this for a pool? <input type="checkbox"/> Yes <input type="checkbox"/> No W x L: _____	<input type="radio"/> New Build:
<input type="radio"/> Electrical:	<input type="radio"/> Pool (Above Grnd): Is there a deck? <input type="checkbox"/> Yes <input type="checkbox"/> No Specs: _____
<input type="radio"/> Demolition: Supply a list of materials being disposed of & disposal company being used	<input type="radio"/> Pool (In Ground): Dimensions: _____
<input type="radio"/> Fence: <input type="checkbox"/> Chain link <input type="checkbox"/> Vinyl <input type="checkbox"/> Wood Height: _____	<input type="radio"/> Porch/Sunroom: <input type="checkbox"/> Front Yard <input type="checkbox"/> Back yard W x L= SF _____
<input type="radio"/> Garage: <input type="checkbox"/> Detached <input type="checkbox"/> Attached Size: _____	<input type="radio"/> Shed: <input type="checkbox"/> Purchasing prebuilt <input type="checkbox"/> Building w/plans Will the shed have electric? <input type="checkbox"/> Yes <input type="checkbox"/> No W X L= SF _____

6. Documentation Required:

☐ **Plans:** Provide plans that apply to your project. Be sure to include photos/specs of the proposed project.

☐ **Insurance:** Contractors need to supply Workers comp & General Liability. If you or a friend are doing the work, submit the CE 200 form

☐ **Survey map:** Draw the location of the project. Be sure to include measurements from the lot lines & house.

7. Job Details: