

TOWN OF RICHLAND
H. Douglas Barclay Courthouse
1 Bridge Street
Pulaski, NY 13142
315-298-5174 ext. 7

TO: All applicants for Zoning Permits

FROM: Zoning Enforcement Officer

RE: Other Permits needed

The Town of Richland Town Board has asked me to advise you that the permit issued by the Town of Richland is for **land use only and only pertains to the Town of Richland's Zoning Ordinance**. You may be required to obtain other permits from other agencies prior to commencing work for said project. These agencies include but not limited to the DEC, Os. Co. Heath Dept., Army Corp of Engineers, National Grid, NYS Dept. of Labor or New York State Building Codes. The Town strongly urges applicants to contact these agencies prior to commencing with a construction project.

Office hours are Mondays from 9:00 am to 11:30 am at the courthouse in Pulaski. You may also call me at 315-532-5651 to schedule an appointment if the office hours posted are not suitable to your schedule.

Date: _____
Applicants Signature

Sincerely,
Jimmy Sprague
Zoning Enforcement Officer

TOWN OF RICHLAND -APPLICATION FOR ZONING PERMIT

Address (proposed Job Site) _____

Nature of Work: New Building _____ Addition _____ Alteration _____ Other
(specify) _____

Dimensions: Height _____ Width _____ Depth _____ Diameter _____ No. of Stories _____

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Habitable Living Area _____ sq. ft. Parking Spaces Provided _____

All Buildings to Property lines (feet) Front _____ Rear _____ Side _____ Side _____
(from site plan drawing)

List ALL Existing Structures _____

Existing Use and Occupancy _____ Is use permitted? _____

Proposed Use and Occupancy _____ Is proposed use permitted? _____

If existing or proposed use is allowed under existing or petitioned special permits,
variance, zone change or interpretation of the zoning ordinance is involved, please
identify (include dates and numbers if available). _____

Owners Name, Address _____

_____ Phone Number _____

Applicants Name and Address _____

_____ Phone Number _____

Contractors Name and Address _____

Signature of Applicant _____

Is Applicant Owner...Lessee...Agent... Engineer... Builder... Other _____

The work for this project will be preformed under the supervision of: _____

_____ Representing: _____

Name, Address _____ Phone No. _____

TOWN OF RICHLAND
ZONING PERMIT APPLICATION: INSTRUCTIONS

1. This application must be completed in ink or typewriter and submitted to the zoning officer.
2. A site plan showing the location of the property, any buildings on the property and where the proposed project is to be done. Also show location of septic and well.
3. WORK MAY NOT COMMENCE PRIOR TO THE ISSUANCE OF A ZONING PERMIT AND ANY OTHER PERMITS THAT MAY BE REQUIRED. SUCH PERMITS SHALL BE DISPLAYED DURING ENTIRE PERMIT PROCESS UNTIL A CERTIFICATE OF OCCUPANCY/COMPLIANCE IS ISSUED.
4. This application must be accompanied by appropriate fee, based on fee schedule available from the Zoning Enforcement Officer.

State of New York

County of _____ ss:

I _____, owner, being duly sworn deposes and says that to the best of his/her knowledge, statements contained in this application, together with plans, specs. and other supporting information submitted are a true and complete statement of all proposed work to be done on the prescribed premises and that all provisions, Zoning Ordinance, and all other laws pertaining to proposed work shall be complied with, and that work as described hereon is authorized by myself and that the inspectors shall be permitted to inspect the premises without the need of a search warrant.

(Signature of Landowner/Applicant)

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Office Use Only

Permit # _____ Approved _____ Disapproved _____ Type _____

Date of Application _____ Zoning District _____ Tax Map# _____

Lot Size _____ sq. ft. _____ acres Lot Coverage _____ sq. ft. _____ %

Remarks or Special Instructions: _____

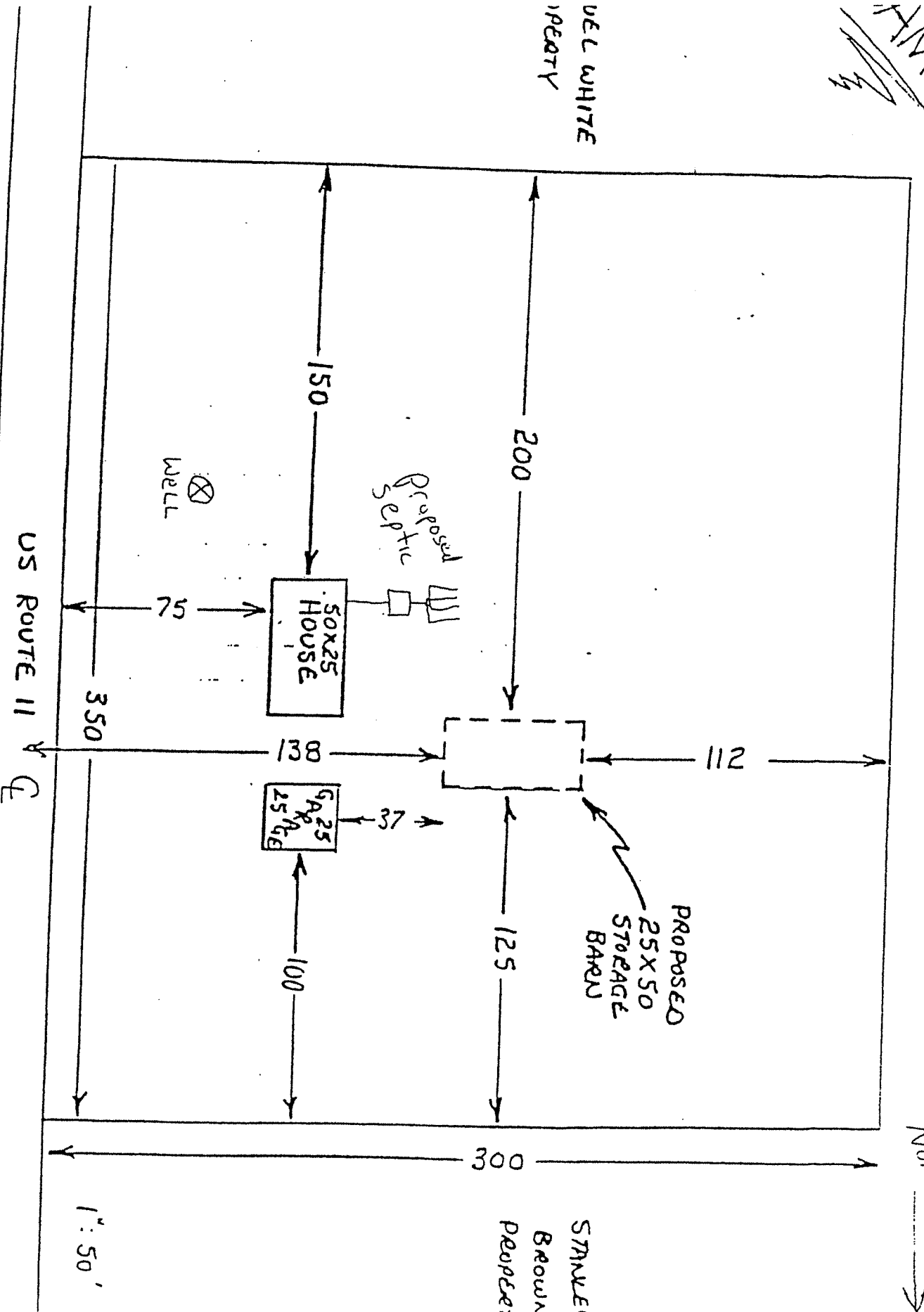
~~FILE~~

DEL WHITE
PROPERTY

PROPERTY

North →

STANLEY
BROWN
PROPERTY



U. BY: Joseph Smith

JOSEPH SMITH PROPERTY

LOT 32
R/R 4