

Village of Alfred

7 West University St., Alfred, NY 14802
Code Enforcement Officer (607) 587-9139

General Building Permit

Please print all information.

1. Applicant's Name Alan R. Bardick Phone (607) 382-5309
Mailing Address P.O. Box 583, Alfred, NY 14802
Location of Job Site (street & number) 58 S. Main St., Alfred, NY 14802
(Tax Map Number) _____

2. Applicant is:

Property Owner Agent for Owner N.Y. State-Licensed Architect
 Tenant or Lessee Contractor N.Y. State-Licensed Professional Engineer
 Other (describe) _____

3. Property Owner(s) Alan Griffin Phone (917) 449-6614
Mailing Address #4 D 114 E. 84th Street, New York, NY 10028

4. Occupancy or Use of the Property (Check all that apply)

	Present	Proposed		Present	Proposed
A1 One-Family Dwelling	<input type="checkbox"/>	<input type="checkbox"/>	C1 Business	<input type="checkbox"/>	<input type="checkbox"/>
A2 Two-Family Dwelling	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	C2 Mercantile	<input type="checkbox"/>	<input type="checkbox"/>
			C3 Industrial	<input type="checkbox"/>	<input type="checkbox"/>
Multiple Dwelling	Number Of Units		C4 Storage	<input type="checkbox"/>	<input type="checkbox"/>
B1 Permanent Occupancy	<input type="checkbox"/>	<input type="checkbox"/>	C5 Assembly	<input type="checkbox"/>	<input type="checkbox"/>
B2 Transient, incl. Fraternity	<input type="checkbox"/>	<input type="checkbox"/>	C6 Institutional	<input type="checkbox"/>	<input type="checkbox"/>
B3 Senior Citizens Residence	<input type="checkbox"/>	<input type="checkbox"/>	C7 Miscellaneous	<input type="checkbox"/>	<input type="checkbox"/>
B4 Adult Residential Care	<input type="checkbox"/>	<input type="checkbox"/>	Specify here: <u>Residential</u>		

5. Nature of Proposed Work (Check all that apply)

Construction of a New Building Relocation of a Building or Structure
 Addition to an Existing Building Stove, Fireplace or Furnace Installation
 Renovation, Alteration Chimney, Flue, Smoke Pipe Installation
 Demolition, Complete or Partial Swimming Pool Installation or Relocation
 Exterior Porch, Deck, Steps Accessory Structure: _____
 Other: _____

6. Project Value, including value of self-labor or donated labor: \$ \$700,000.00

7. Architect or Engineer of Record

Name JHL Teature Architects Business Phone (607) 731-1138
Mailing Address 97 Main Street, Hornell, NY 14843

8. General Contractor/ Builder

Name Bardick Building Services, Inc. Business Phone (607) 382-5309
Mailing Address P.O. Box 583, Alfred, NY 14802

Note: A Zoning Compliance Permit (ZCP) is required for most projects. When a ZCP is required, a Building Permit will not be issued prior to the issuance of the ZCP.

9. Has a Zoning Compliance been issued for this project?

<input type="checkbox"/>	Yes	Permit number _____; Issue Date _____
<input checked="" type="checkbox"/>	No	But a Zoning Compliance Permit is not required for this project.
<input type="checkbox"/>	No	But an application has already been filed.
<input type="checkbox"/>	No	But an application will be filed in the near future.

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10. Has any work covered by this application been started or completed: Yes [] No.
If "Yes," explain below (no. 13)

11. Plans and Specifications: are enclosed or attached being shipped separately []

12. Will wages be paid to anyone working on this project? Yes [] No. If "Yes," insurance coverage is required, per New York State Workers' Compensation Law and Disability Law. A copy of the Certificate of Insurance must be filed with the office of the Code Enforcement Officer before a Building Permit will be issued. If a current Certificate of Insurance is already on file in this office, please check here: NOT SURE IF IT IS UP TO DATE -- IF NOT I CAN HAVE THEM SEND IMMEDIATELY!

13. Describe the Proposed Project: Renovation of Existing home and a (2) story addition (15' x 20' 3") and a (4) Car garage (20' x 50')

14. Additional Information:

15. I affirm that I am the applicant above named, and that I am:

The Property Owner []; Officer of the Property Owner []; Agent for the Property Owner Tenant or Lessee []; Other (please describe) Contractor

And that I am duly authorized to perform or have performed the said work and to make and follow this application; that all information contained herein or furnished by me in support of this application is true and correct to the best of my knowledge and belief; and that all work in connection with the proposed project will be performed in the manner set forth in this application and in plans, specifications and other supporting information, and in accordance with all applicable laws and regulations.

A. Van R. Burdick
Signature of Applicant

March 29, 2023
Date

* * * * *

For Office Use Only
\$ 1145.00 fee received by Monica Masters on 3/29/2023 Check 7811
Approved by _____, Code Enforcement Officer, on _____
Permit no. _____ issued by _____ on _____

Village of Alfred, New York Building Permit Application

THIS SECTION FOR OFFICE USE ONLY

Application Number _____ Zoning District _____ Date of Application _____

Application requires Planning Board approval yes no

Application for: _____ Preliminary Site Development Plan Approval → No Fee
 _____ Final Site Development Plan Approval → \$45.00
 _____ Zoning Compliance Permit → \$45.00
 _____ Special Use Permit → \$45.00
 _____ Demolition Permit → \$45.00

Check whether the current or last previous use is listed in the Zoning Law.

- Permitted Use Prohibited Use
 Special Permit Use Not Listed (may be non-conforming use)
 Permit Granted for Use by Action of the ZBA

Check if application requires approval from Allegany County Planning Board

Instructions:

- All information must be typewritten or printed in black ink.
- This form with **any** attachments is to be submitted with the required fee to the VILLAGE CLERK. *Incomplete applications will not be considered.*
- A detailed scale drawing must be included.

1. Applicant's Name ALAN R. BURDICK Phone 607-382-5309
 Mailing Address P.O. Box 583, ALFRED, NY 14802
2. Owner's Name ALAN GRIFFIN Phone 917-449-6614
 Mailing Address #40 114 E. 84th Street, New York, NY 10028
3. Location of project property 58 S. Main St, ALFRED, NY 14802
4. If you are not the owner, in what capacity do you represent the owner? Contractor
5. Current use of project space Residence
6. Estimated cost of proposed project \$700,000.00
7. Estimated time for completion following issuance of permit 1 year 9 months
8. Anticipated increase in number of residents, shoppers, employees, etc. (if applicable to project). _____

9. Proposed project dimensions-please provide measurements in feet.

Proposed	Measurements
Setback from front property lines	
Setback from side property lines	
Setback from rear property	
Percentage of total lot area now occupied by all buildings	
Percentage of total lot area proposed to be occupied by all buildings	
Area of proposed new structure or addition in square feet.	<u>300 for addition, 1000 for Garage</u>
Height of proposed new structure in feet	

**Village of Alfred, New York
Building Permit Application**

I, the undersigned, hereby apply for approval or permit as checked on page one, for the purposes and on the site described herein, and agree that such purposes shall be undertaken in accordance with all the applicable laws and regulations of the Village of Alfred and the State of New York. I understand that any permit or approval issued pursuant to this application shall expire if the project or action or use has not commenced within one year from the time of issuance. I further declare that all the statements contained in this application and in any accompanying plans and specifications are true to the best of my knowledge and belief and that the work or action to be performed and/or the use of property will be in conformity with the data in this application.

The owner or a representative of the project must be present at the planning board meeting if the application requires planning board approval.

Signature of Applicant _____ Date _____

FOR OFFICE USE ONLY

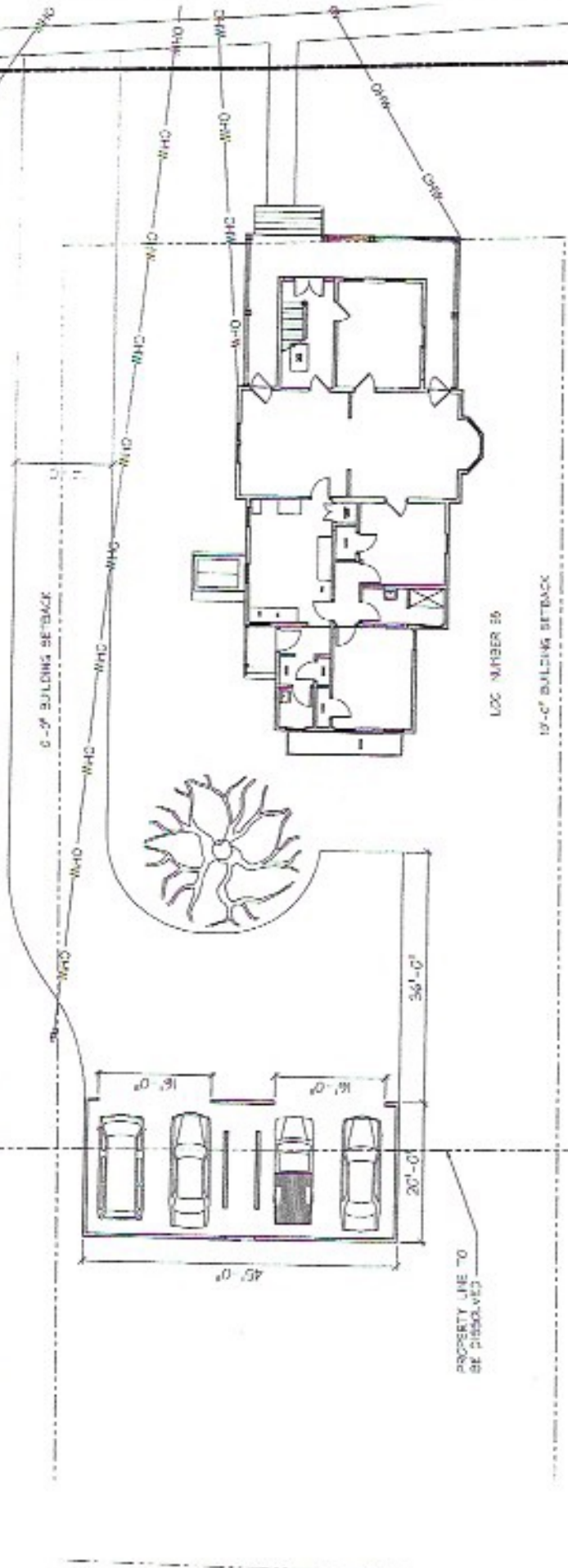
Fee of \$1145.⁰⁰ received by Monica Masters Village Clerk, Date 3/29/2023 Check
7311
Application received by _____ Zoning Enforcement Officer, Date _____
Application received by Pat LaCourse Planning Board Representative, Date 4/10/23
Action by Planning Board approved denied Date _____
Justification for denial _____

Variance required: yes no
Action by Allegany County Planning Board _____

W-100000 MARKER
 OVERHEAD ELECTRY
 NEW GRAVEL
 NEW CONCRETE 51

LOC. NUMBER 56

PROPERTY LINE TO BE ESTABLISHED



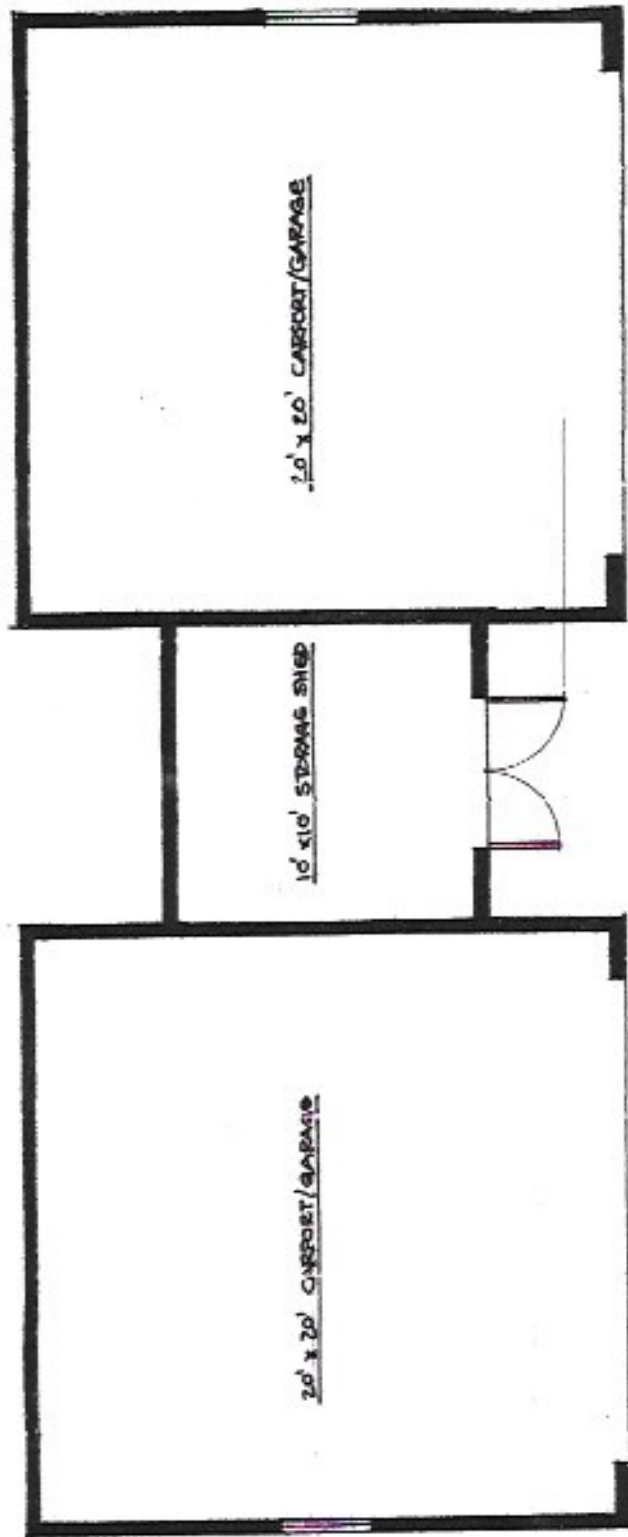
LOC. NUMBER 55

LOC. NUMBER 56

60 S MAIN STREET

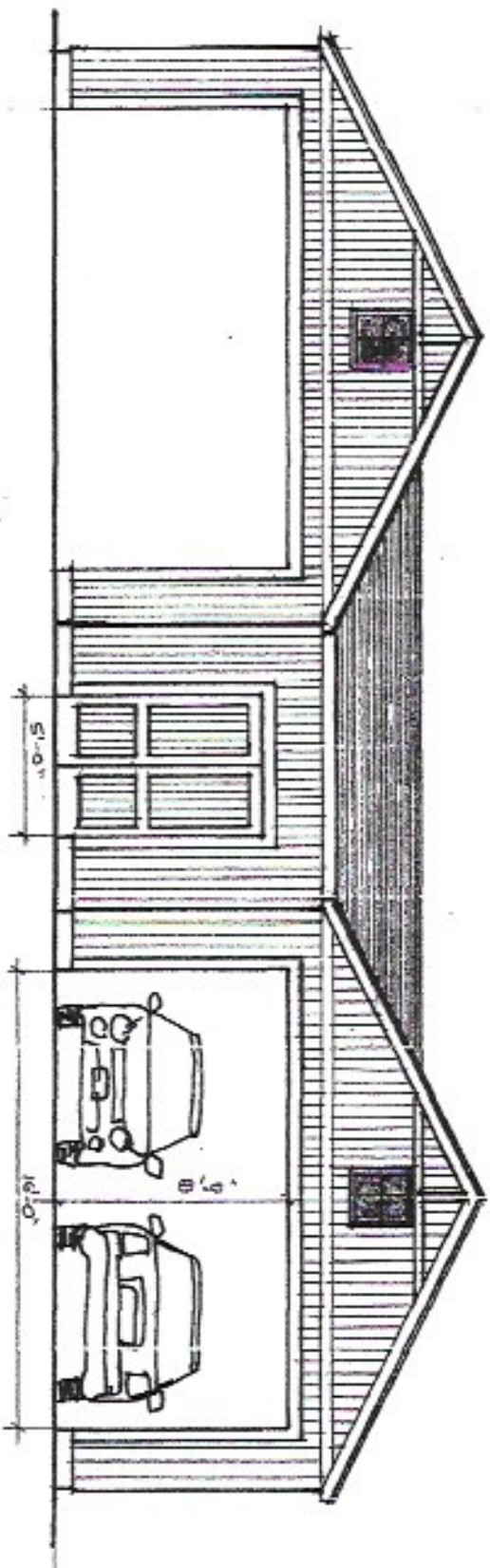
PROPERTY LINE TO BE DISOLVED

SITE PLAN
 8/20/11 - 8:00



FLOOR PLAN
4 1/2" x 11.0"

SCHEME - A



ELEVATION
1/4" = 1'-0"

SCENE-A

