

Town of Sangerfield

Code Enforcement Office
1084 State Route 12
Sangerfield, New York 13455
(315) 864-4085

CHECKLIST FOR COMMERCIAL/RESIDENTIAL PERMIT APPLICATION

Each applicant shall cause the referenced items to be submitted, when applicable, at the time of application

1. **Construction Documents;** these may include:
 - a. Building permits
 - b. Statement of special inspections
 - c. Geotechnical reports
 - d. Sufficient documentation to show compliance with the New York State Building and Fire Code(s) and all other codes, laws, ordinances, regulations, and more restrictive local standards
 - e. Site survey (professionally prepared)

2. **State Energy Code Compliance Documents;** application must include all items required by the 2025 Energy Conservation Construction Code of New York State (and as amended). When applicable, also include documentation related to the exterior wall envelope including but not limited to:
 - Flashing
 - Intersections at roof
 - Control joints
 - Parapets
 - Eaves
 - Means of drainage
 - Water resistive membrane including details at openings and penetrations
 - Exterior wall systems
 - Intersections at exterior balconies and elevated walking surfaces

3. **Construction Plans;** application must include stamped architectural plans, drawn to scale, which shall include:
 - Plans for all floors that document all portions of the means of egress including occupant loads
 - Clear definitions of location and limits of the work area(s) and scope for each separate work area
 - Site plan(s) that show all the new and existing structures and document exit discharge as part of the means of egress system

- If the project includes alterations or repairs that affect the exterior, a copy of the property survey containing fire-separation distances, street grades, finished elevations, and when applicable, floodplain design documentation
- If subdividing a space (expanding or reducing), include adequate information to show compliance for the remainder of the adjacent space(s)
- For separated occupancies, document all separations between tenants and or occupancies
- Show intake and exhaust discharge locations of any mechanical systems
- Include roof covering and interior finish classes

4. **Structural Information;** application must provide information in accordance with the 2025 Building Code of New York State.

5. **Shop Drawings for Fire Protection Systems;** the Town Code Enforcement Officer must approve these plans before installation of any fire protection systems.

6. **Proof of Compliance with 2025 Fire Code of New York State (as amended);** this applies to all new structures and additions. Structural plans must be drawn to scale and include complete foundation details, elevation and section views, and framing details. They must include:

- A survey and detailed site plan that shows elevations and contours
- Location of the building you are working on and all buildings that are directly next to it
- Water service and the sewer and storm drainage
- Building code analysis/code review for your specified occupancy

If your project costs more than \$20,000 and includes structural changes to a building that could affect its safety, applicant will need an architect or engineer's stamp on your construction drawings.

7. **Overall Site Plan;** must include location of all improvements, ingress & egress, and infrastructure.

8. **Proof of Insurances;** applicant must include the follow:

- Proof of Liability Insurance listing the Town of Sangerfield as an additional insured
- Proof of Disability Insurance
- Proof of Workers Compensation Insurance or CE-200 – Certificate of Attestation of Exemption (if not required to carry workers' compensation and/or disability coverage)

TOWN OF SANGERFIELD
APPLICATION FOR BUILDING PERMIT

TOWN OF SANGERFIELD
1084 ST RT 12, PO BOX 34
SANGERFIELD, NY 13455

INSTRUCTIONS

- A. This application must be filled in by ink and submitted to the Town Clerk.
- B. Plot Plan - showing location of lot and of building on premises, relationship to adjoining premises or public streets or areas, and giving a detailed description of a layout of property must be drawn on the diagram, which is part of the application.
- C. This application must be accompanied by (1) complete set of plans showing proposed construction and (2) complete set of specifications. Plans and specifications shall describe the nature of work to be performed, the materials and equipment to be used and installed and details of structural, mechanical, electrical and plumbing installations
- D. The work covered by this application may not be commenced before the issuance of the Building Permit.
- E. Upon approval of this application, the Codes Office may issue a Building Permit to the applicant with an approved set of plans and specifications. Such permit and approved plans and specifications **MUST** be kept on the premises available for inspection throughout the progress of work.
- F. No building shall be occupied, or used in whole or in part, for any purpose that the Codes Enforcement Officer shall have granted, until a Certificate of Occupancy has been issued by the Code's Officer.

Application is hereby made for the issuance to the undersigned of a building permit to erect, relocate, or alter, as to the outside dimensions, a building located at:

Address _____
(Give street number, name, side and distance from nearest cross street)
Map _____ Section _____ Block _____ Lot _____ Zone _____

THE ACTUAL DIMENSIONS/ANGLES OF THE LOT AND THE EXACT SIZE/LOCATION OF THE PARCEL OF THE EXISTING AND PROPOSED BUILDING ARE AS SHOWN ON THE SKETCH APPEARING IN THE PROVIDED GRID.

Building Permit # _____ Date: _____

TAX PARCEL # _____ Can be found in the Code's or Clerk's Office

TOWN OF SANGERFIELD
APPLICATION FOR BUILDING PERMIT

NATURE OF WORK:

NEW BUILDING _____ ADDITION _____ ALTERATION _____ POOL _____
DEMOLITION* _____ SEPTIC _____ ZONING _____ OTHER _____

**DEMOLITION PERMITS ARE REQUIRED TO HAVE ASBESTOS SURVEY PRIOR TO ISSUANCE*

LIST PROPOSED USE, OCCUPANCY AND PURPOSE OF SAID BUILDING (RESIDENTIAL, AGRICULTURAL, COMMERCIAL, ETC.):

THE BUILDINGS NOW ON THE LOT ARE USED FOR THE FOLLOWING PURPOSES (RESIDENTIAL, AGRICULTURAL, COMMERCIAL, ETC.):

OWNER OF PROPERTY:

NAME _____ PHONE # _____

ADDRESS _____

PROPOSED STRUCTURE DIMENSIONS: LENGTH _____ WIDTH _____

HEIGHT TO PEAK _____ NUMBER OF STORIES _____

SQUARE FEET OF PROPOSED STRUCTURE _____

SQUARE FEET OF EXISTING STRUCTURE _____

TOTAL COST OF CONSTRUCTION _____

NAME OF CONTRACTOR _____ PHONE # _____

ADDRESS _____

Application is hereby made to the Town of Sangerfield for the issuance of a Building Permit pursuant to the New York State Codes for the construction of buildings, additions or alterations, or for the removal or demolltion, as herein described. This applicant agrees to comply with all applicable laws, ordinances and regulations.

(Signature of applicant)

(Date MM/DD/YYYY)

PRINT NAME CLEARLY: _____

Important

A drawing must be submitted with each Building Permit Application. Indicate on the provided grid to show dimensions and angles of the lot. Clearly locate all buildings, whether existing or proposed and show street names and indicate exact distances on all sides from property lines to buildings. If this section is not completed correctly, applications may be delayed for additional information. If you have any questions, please contact the Sangerfield Planning Board or Town Clerk's office for assistance.

Building Permit # _____ Date: _____/_____/_____

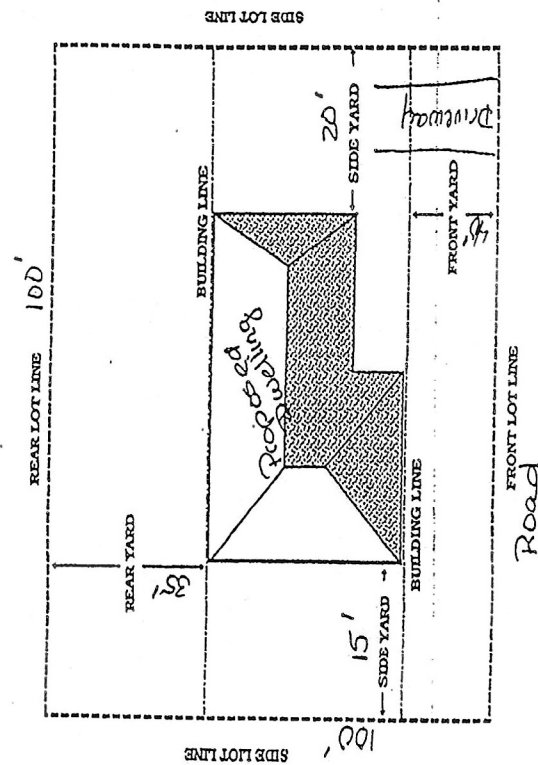
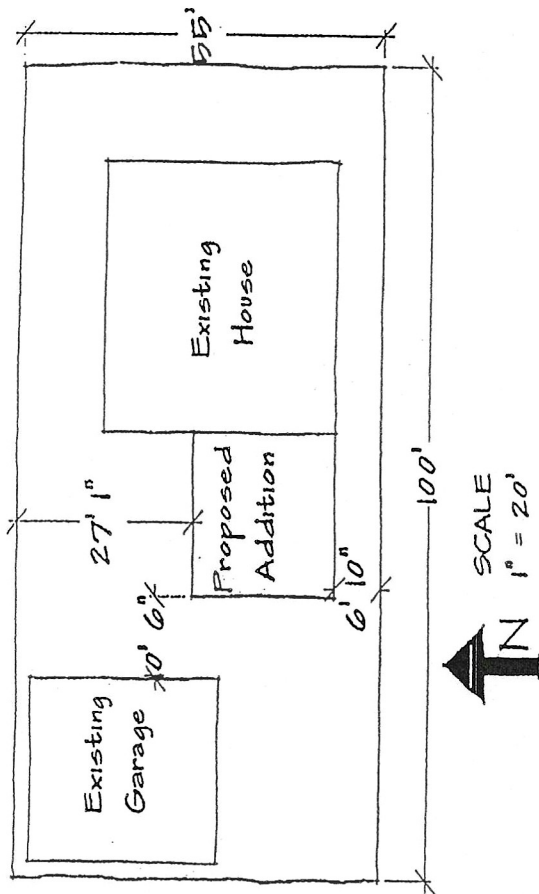
TAX PARCEL # _____ Can be found in the Code's or Clerk's Office

TOWN OF SANGERFIELD

APPLICATION FOR BUILDING PERMIT

MINIMUM DIMENSIONS

A - R District	Lot Area	Lot Front ft	Lot Depth ft	Yards Front ft	Yards Side ft	Yards Rear ft	Max. Bldg. ht & ft
Single-family unit	40,000 sq. ft.	150	125	50	40	50	35
Two-family unit	45,000 sq. ft.	150	125	50	40	50	35
Multi-family at 10,000 sq. ft. per dwelling unit		150	125	50	40	50	45
Cluster development	On separate application for a special use permit						
Farm	5 ac.	150	125	50			
Farm buildings				50	50	50	
Mobile dwelling	40,000 sq. ft.	150	125	50	40	50	35
Mobile dwelling park	2 ac.	150	125	50	30	50	
Each unit 5,000 sq. ft.		70	50	30	20	20	35
Business, Professional, or Industrial, on separate lots	1 ac.	100	75	50	40	50	35
Accessory Buildings							



Building Permit # _____ Date: ____/____/____

TAX PARCEL # _____ Can be found in the Code's or Clerk's Office

TOWN OF SANGERFIELD ZONING BOARD OF APPEALS
1084 State Route 12 • Sangerfield, NY 13455
315.841.4884

V. ADDITIONAL INFORMATION (Please attach with application)

1. *A completed environmental assessment short form required.
2. Written Narrative of the proposed project, with any facts the applicant feels are pertinent.
3. Aerial photo of subject property (may be obtained from Town Assessor).
4. A plot plan of the property, if available, otherwise a diagram drawn to scale showing the septic system, well location and driveway(s).
5. A sketch of the proposed improvement drawn to scale.
6. Copy of deed, contract to purchase, or lease agreement.

**Could be subject to the long form or environmental impact study*

Signature of Applicant: _____

- Return the Completed Application and any additional information to:
Sangerfield Town Clerk
1084 State Route 12
Sangerfield, New York 13455
- Be sure to include payment of the required fee.
(Checks payable to the Sangerfield Town Clerk)

VI. ZONING ENFORCEMENT OFFICER DECISION:

- () Approved
- () Approved – Pending site plan review
- () Denied – See Attached Notice of Denial

Zoning Code Enforcement Officer

Date

Appendix C

State Environmental Quality Review
SHORT ENVIRONMENTAL ASSESSMENT FORM
 For UNLISTED ACTIONS Only

PART I - PROJECT INFORMATION (To be completed by Applicant or Project Sponsor)

1. APPLICANT/SPONSOR	2. PROJECT NAME
3. PROJECT LOCATION: Municipality _____ County _____	
4. PRECISE LOCATION (Street address and road intersections, prominent landmarks, etc., or provide map)	
5. PROPOSED ACTION IS: <input type="checkbox"/> New <input type="checkbox"/> Expansion <input type="checkbox"/> Modification/alteration	
6. DESCRIBE PROJECT BRIEFLY:	
7. AMOUNT OF LAND AFFECTED: Initially _____ acres Ultimately _____ acres	
8. WILL PROPOSED ACTION COMPLY WITH EXISTING ZONING OR OTHER EXISTING LAND USE RESTRICTIONS? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, describe briefly	
9. WHAT IS PRESENT LAND USE IN VICINITY OF PROJECT? <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Agriculture <input type="checkbox"/> Park/Forest/Open Space <input type="checkbox"/> Other Describe: _____	
10. DOES ACTION INVOLVE A PERMIT APPROVAL, OR FUNDING, NOW OR ULTIMATELY FROM ANY OTHER GOVERNMENTAL AGENCY (FEDERAL, STATE OR LOCAL)? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, list agency(s) name and permit/approvals:	
11. DOES ANY ASPECT OF THE ACTION HAVE A CURRENTLY VALID PERMIT OR APPROVAL? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, list agency(s) name and permit/approvals:	
12. AS A RESULT OF PROPOSED ACTION WILL EXISTING PERMIT/APPROVAL REQUIRE MODIFICATION? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<p style="text-align: center;">I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE</p> Applicant/sponsor name: _____ Date: _____ Signature: _____	

If the action is in the Coastal Area, and you are a state agency, complete the Coastal Assessment Form before proceeding with this assessment

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

Part 1 – Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 – Project and Sponsor Information			
Name of Action or Project:			
Project Location (describe, and attach a location map):			
Brief Description of Proposed Action:			
Name of Applicant or Sponsor:		Telephone:	
		E-Mail:	
Address:			
City/PO:		State:	Zip Code:
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.		NO <input type="checkbox"/>	YES <input type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other government Agency? If Yes, list agency(s) name and permit or approval:		NO <input type="checkbox"/>	YES <input type="checkbox"/>
3. a. Total acreage of the site of the proposed action? _____ acres			
b. Total acreage to be physically disturbed? _____ acres			
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ acres			
4. Check all land uses that occur on, <u>are</u> adjoining [and] <u>or</u> near the proposed action.			
<input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban)			
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____			
<input type="checkbox"/> Parkland			

		NO	YES	N/A
5. Is the proposed action,	a. A permitted use under the zoning regulations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. Consistent with the adopted comprehensive plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?		NO	YES	
		<input type="checkbox"/>	<input type="checkbox"/>	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area?		NO	YES	
If Yes, identify: _____		<input type="checkbox"/>	<input type="checkbox"/>	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?		NO	YES	
b. Are public transportation service[s] available at or near the site of the proposed action?		<input type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near the site of the proposed action?		<input type="checkbox"/>	<input type="checkbox"/>	
9. Does the proposed action meet or exceed the state energy code requirements?		NO	YES	
If the proposed action will exceed requirements, describe design features and technologies: _____ _____		<input type="checkbox"/>	<input type="checkbox"/>	
10. Will the proposed action connect to an existing public/private water supply?		NO	YES	
If No, describe method for providing potable water: _____		<input type="checkbox"/>	<input type="checkbox"/>	
11. Will the proposed action connect to existing wastewater utilities?		NO	YES	
If No, describe method for providing wastewater treatment: _____		<input type="checkbox"/>	<input type="checkbox"/>	
12. a. Does the project site contain, or is it substantially contiguous to, a building, archeological site, or district that [a structure that] is listed on [either] the National Register of Historic Places or the State Register of Historic Places or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places?		NO	YES	
b. Is the [proposed action] project site, or any portion of it, located in or adjacent to an area designated as [archaeologically] sensitive [area] for archaeological sites on the NY State Historic Preservation Office (SHPO) archaeological site inventory?		<input type="checkbox"/>	<input type="checkbox"/>	
13. A. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?		NO	YES	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody?		<input type="checkbox"/>	<input type="checkbox"/>	
If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____		<input type="checkbox"/>	<input type="checkbox"/>	

14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input type="checkbox"/> Suburban		
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
16. Is the project site located in the 100-year flood plan?	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes,	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
a. Will storm water discharges flow to adjacent properties?	<input type="checkbox"/>	<input type="checkbox"/>
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe:	<input type="checkbox"/>	<input type="checkbox"/>
<hr/> <hr/>		
18. Does the proposed action include construction or other activities that <u>would</u> result in the impoundment of water or other liquids (e.g., retention pond, waste lagoon, dam)? If Yes, explain the purpose and size <u>of the impoundment</u> :	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
<hr/> <hr/>		
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe:	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
<hr/> <hr/>		
20. Has the site of the proposed action or an adjoining property been <u>the</u> subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe:	NO	YES
	<input type="checkbox"/>	<input type="checkbox"/>
<hr/> <hr/>		
I [AFFIRM] CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE		
Applicant/sponsor name: _____ Date: _____		
Signature: _____ Title: _____		

Project: _____
 Date: _____

Short Environmental Assessment Form Part 2 - Impact Assessment

Part 2 is to be completed by the Lead Agency.

Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?	<input type="checkbox"/>	<input type="checkbox"/>
2. Will the proposed action result in a change in the use or intensity of use of land?	<input type="checkbox"/>	<input type="checkbox"/>
3. Will the proposed action impair the character or quality of the existing community?	<input type="checkbox"/>	<input type="checkbox"/>
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?	<input type="checkbox"/>	<input type="checkbox"/>
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?	<input type="checkbox"/>	<input type="checkbox"/>
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?	<input type="checkbox"/>	<input type="checkbox"/>
7. Will the proposed action impact existing: a. public / private water supplies? b. public / private wastewater treatment utilities?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?	<input type="checkbox"/>	<input type="checkbox"/>
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?	<input type="checkbox"/>	<input type="checkbox"/>
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?	<input type="checkbox"/>	<input type="checkbox"/>
11. Will the proposed action create a hazard to environmental resources or human health?	<input type="checkbox"/>	<input type="checkbox"/>

PRINT FORM

Project: _____

Date: _____

Short Environmental Assessment Form Part 3 Determination of Significance

For every question in Part 2 that was answered "moderate to large impact may occur", or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

- Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.
- Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.

Name of Lead Agency

Date

Print or Type Name of Responsible Officer in Lead Agency

Title of Responsible Officer

Signature of Responsible Officer in Lead Agency

Signature of Preparer (if different from Responsible Officer)

PRINT FORM

TOWN OF SANGERFIELD ZONING BOARD OF APPEALS
 1084 State Route 12 • Sangerfield, NY 13455
 315.841.4884

ZONING ENFORCEMENT OFFICER NOTICE OF DENIAL OF ZONING PERMIT

I. USE ISSUES

1. Zoning District of Subject Property: _____
2. Is the use permitted by the Zoning Ordinance?
3. Is the use permitted with a Special Use Permit?

Applicant: _____
Application #: _____

II. AREA ISSUES

Under current Zoning Law:

	YES	NO	ACTUAL	REQUIRED	DIFFERENCE
1. Is lot area sufficient for use?					
2. Is lot width sufficient for use?					
3. Is front set back sufficient?					
4. Is side yard set back sufficient?					
5. Is rear yard set back sufficient?					
6. Does lot access a public highway?					

Have previous variances or special use permits been granted? ____ (Yes) ____ (No) Date: _____

III. APPEAL TO ZONING BOARD OF APPEALS

If applicant wishes to appeal this decision to the Town of Sangerfield Zoning Board of Appeals, the Applicant should apply for:

	1. An interpretation of the Law as it applies to Section _____ of the Zoning Law.
	2. A special use permit for the following type of use under Section _____ of the Zoning Law.
	3. An area variance to the Zoning Law, specifically Section _____ of the Zoning Law.
	4. A use variance to the Zoning Law, specifically Section _____ of the Zoning Law.

IV. ADDITIONAL INFORMATION REQUIRED FOR APPEAL TO ZONING BOARD OF APPEALS:

1. Aerial photo that shows all other properties that lie, in whole or in part, within 1000 feet of a boundary of the subject property.
2. Survey of subject property.
3. Applicable engineering diagrams

PLEASE NOTE: Applications must be submitted fourteen (14) days prior to the Zoning Board of Appeals meeting. The Board meets on the **FIRST MONDAY** of each month. The applicant or representative **MUST** attend the scheduled meeting.

 Zoning Code Enforcement Officer

 Date