# ACCESSORY BLDG. <u>Agricultural</u> Permit Fee \$0.10 per SQ FT (\$100 minimum)

TOWN OF EDEN BUILDING DEPARTMENT TEL: 716-992-3408 2795 EAST CHURCH STREET FAX: 716-992-4131

EDEN, NY 14057 EMAIL: <a href="mailto:building@edenny.gov">building@edenny.gov</a>



### BUILDING PERMIT APPLICATION CHECKLIST FOR - ACCESSORY BLDG-Agriculture

All of the following items MUST be submitted with this application in order to obtain a Building Permit
Completed BUILDING PERMIT APPLICATION form
A copy of the existing and most current and accurate survey or site plan.  Drawn to scale, proposed structure on the survey or site plan with the dimensions of the proposed structure, including property line setbacks from both side and back yard property line.
Signed and notarized copy of Form AUA-1 (Agricultural Use Affidavit)

## ACCESSORY BLDG. Agricultural Permit Fee \$0.10 per SQ FT (\$100 minimum)

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2795 EAST CHURCH STREET	FAX: 716-992-4131
EDEN, NY 14057	EMAIL: building@edenny.gov
APPLICATION MUST BE COMPLETELY FILLED OUT	(incomplete applications will NOT be accepted)
1. OWNER	
NAME	PHONE
ADDRESS	
TOWN ZIP	
APPLICANT IS: Owner Contractor Age	ent Engineer Other (specify)
2. CONTACT INFO (if same as above list "same")	wner Contractor Other
NAME	PHONE #1
	PHONE #2
3. CONTRACTOR INFORMATION	
NAME	PHONE
ADDRESS	
TOWN ZIP	
4: PROPOSED PROJECT (check all that apply)	
NEW BUILDING ADDITION ALTERA	ATION CHANGE OF USE REPAIR
	L PERMIT OTHER
5: PROJECT DESCRIPTION (basic description, use, size and	d cost of what is being proposed)
What is being Built: Stud Build Pole type	• · · · /
Proposed Size	
Project estimated cost (estimate only - does not affe	
1 Toject estimated 60st ( <u>estimate only</u> - does not and	ti doscosmenty \( \psi_{
6: PROPOSED USE	
Vehicle storage Cold storage Other	
17. PROPOSED LOCATION	
*Attached to Building Detached from Buildir	ng Other
* May require additional Fire Code's	
May require additional Fire Code's	
7. EXISTING UTILITIES ON PROPOSED PROJECT PROPE	RTY (determines zoning user group)
	sting Well None
SEWER: Public New Septic Exis	sting Septic None

8. WILL NEW CONSTRUCTION INC	CLUDE:			
ELECTRICAL YES	NO PLUMBIN	IG TYES NO		
HEATING YES NO AIR CONDITIONING YES NO				
TYPE OF HEAT (if applicat		Propane Oil Other		
,	Barns, Sheds) Concrete	<u> </u>		
1 2001( 111 2 (Garagoo, 2	Jame, Gridady Goriorate			
9. CONTRACTOR WORK				
Are wages being paid for performan	ce of this work (are you hiring	a Contractor?) YES NO		
	, ,	s Compensation and Disability benefits.		
ACCEPTABLE PROOF	ibility insurance, 1410 Worker	5 Compensation and Disability Benefits.		
- Form DB121.1				
	ability & Workers Compensation	n		
- C105.2 or U-26.3	bility & Workers Compensation	11		
	Lightlity Ingurance			
<ul> <li>Certificate of General I</li> </ul>	Liability insurance			
10. NEW YORK STATE LICENSED	PROFESSIONAL (when requ	uired)		
	•	conservation evaluations etc) for this project		
NIANATE	, , , , , , , , , , , , , , , , , , , ,	IONE		
ADDRESS		MAIL		
TOMMUZID				
License Number		R/A PE T		
11. STARTED WORK				
Has any work included in the applic	ation been started or complete	ed YES NO If <b>YES</b> Explain		
	·			
12. APPLICATION CERTIFICATION	<b>J</b> :			
In consideration of the permit applies	d for, the undersigned hereby	agrees that he/she will comply with the Code of		
New York, Town of Eden Code and	any other laws which may be a	applicable that he/she will preserve the		
establishment of lot lines, disclose a	Ill information to the Code Enfo	orcement Officer, and that he/she will not use		
nor permit to be used the structure b	by the application until a Certific	icate of Occupancy (CO) or Certificate of		
Compliance (CC)is legally issued.	•	. ,		
. , , , ,				
SIGNATURE		DATE		
42 INCLUCIONO				
13. INCLUSIONS:	and the decrease the desired the first #	MIOT be a designed with the complete for		
All documents and information requi	red on the provided checklist <u>I</u>	MUST be submitted with this application.		
FOR OFFICE USE O	NLY – Application to be sub	omitted to the Eden Town Clerk		
	\$0.10 – Minimum of \$100 =			
Additional Fee's	Reason:	Total Fee Due		
Payment must be made by Cash,	Check or Credit Card Che	eck made payable to the Eden Town Clerk		
Date Received by Clerk	Amount Credited \$	Cash CC Check #		

Application #	Amount Due \$	Cash	CC	Check #	
$\tau$	Amount Due w	Oasii	00	$\sigma$	

## **FORM AUA-1**

### AGRICULTURAL USE AFFIDAVIT

Name :	Address:
Permit No.:	Structure:
I, the undersigned, herby agree that the used as:	subject Accessory Building/Structure will be solely
livestock or other structure designed	d to house farm implements, hay, grain, poultry, , constructed or used, in whole or in part, for loyment where agricultural products are processed, a place used by the public.
Failure to meet this definition may resu Chapter 225 Zoning.	alt in a possible violation of Eden Town Code Part II,
(Signature of Homeowner)	(Date Signed)
(Homeowners Name Printed)	(Home Telephone)
Sworn to before me thisday	y of,
(County Clerk or Notary Public)	_

<sup>\*</sup> This form to be signed and included with the Building Permit.