

**TOWN OF LOCKPORT  
BUILDING INSPECTOR  
6200 Robinson Rd.  
Lockport, New York 14094  
Phone (716) 439-9527 Fax (716) 439-9532**

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## COMMERCIAL CONSTRUCTION PERMIT APPLICATION

*This application is for permission to construct the following Commercial Building in compliance with the Town of Lockport Local Law and New York State Building Codes*

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**NAME OF APPLICANT:** \_\_\_\_\_ **SBL#** \_\_\_\_\_

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1. Date Application Submitted: \_\_\_\_\_

2. Planning Board Approval Date: \_\_\_\_\_

3. Type of Improvement and Estimated Cost:

Type of Construction:

Estimated Cost:

\_\_\_\_\_ Road Construction \$ \_\_\_\_\_

\_\_\_\_\_ Water Line \$ \_\_\_\_\_

\_\_\_\_\_ Drainage/Storm Water Management \$ \_\_\_\_\_

\_\_\_\_\_ Sanitary Sewer \$ \_\_\_\_\_

\_\_\_\_\_ Lighting \$ \_\_\_\_\_

\_\_\_\_\_ Sidewalks \$ \_\_\_\_\_

\_\_\_\_\_ Building \$ \_\_\_\_\_

\_\_\_\_\_ Other: \_\_\_\_\_ \$ \_\_\_\_\_

Total Estimated Costs: \$ \_\_\_\_\_

4. Subdivision or Project Name: \_\_\_\_\_

5. Street Name (s) : \_\_\_\_\_

\_\_\_\_\_

6. Brief Description of Each Proposed Construction Project, including:

Type: \_\_\_\_\_

Location: \_\_\_\_\_

Footage Total: \_\_\_\_\_

Dimensions: \_\_\_\_\_

Type of Material: \_\_\_\_\_

Itemized Quantities: \_\_\_\_\_

Depth of Improvement: \_\_\_\_\_

Height of Improvement: \_\_\_\_\_

Attach additional page "Item Number 6, Continued", if necessary.

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7. Contractor (s): \_\_\_\_\_  
Attach additional sheets, if necessary. **ALL** contractors and subcontractors must be listed.

Contractor's Address: \_\_\_\_\_

Contractor's Phone: \_\_\_\_\_

8. Applicant's Engineer: \_\_\_\_\_

Engineer's Address: \_\_\_\_\_

Engineer's Phone: \_\_\_\_\_

9. Amount of Surety Bond: \_\_\_\_\_

Company Supplying Bond: \_\_\_\_\_

Company's Address: \_\_\_\_\_

10. Is the property subject to Homeowner's Association Regulations or other private maintenance agreements? Yes: \_\_\_\_\_ No: \_\_\_\_\_

**If yes**, have the appropriate easements, dedications, right-of-way deed and agreements been recorded? Submit copies of recorded documents and regulations.

*By signing this Application, the applicant represents: He(She) is duly authorized to act on behalf of the applicant, and work under this permit shall be started within 60 days and completed within one year from the date of approval thereof. Any request for extension shall be addressed in writing to the Lockport Town Board.*

*In consideration of the granting of this permit, the undersigned hereby agrees that if such permit is granted, the applicant will comply with the terms thereof, the law and regulations of the State of New York and the law, regulations and/or ordinances of the Town of Lockport, conditions of which include but are not limited to:*

- A) All work will be performed in accordance with approved plans and specification and requirements of Federal, State, and Local Laws;*
- B) The Owner/Applicant will obtain and pay for all necessary permits;*
- C) The Owner/Applicant will notify the Town Engineer 72 hours before commencing work under this permit;*
- D) Inspection by the Town, its engineers or agents during construction is solely for the Town. The Applicant, its Contractors and agents are solely responsible for proper engineering, construction methods and materials, conformance with specifications and safety of workers and the Public, and shall hold the Town of Lockport, its agents, engineers and consultants harmless from any and all liability arising from applicant's activities pursuant to the Public Improvement Construction Permit.*
- E) As-built drawings will be submitted upon completion prior to issuance of CERTIFICATE OF APPROVAL.*

*The Owner also warrants that he/she is cognizant of the fact that the Public Improvement fee is based on work being performed during normal working hours (7:00 a.m. to 5:00 p.m.) , Monday through Friday, except for legal holidays, and that deviations from such schedule or hours will require Town Supervisor approval and may also involve imposition of additional fees.*

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Applicant's Name (Please Print)

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I have reviewed and approved the plan and specifications filed with the Application.

\_\_\_\_\_ Date: \_\_\_\_\_  
Signature of Town Engineer

Approval by the Town of Lockport (sign and date):

\_\_\_\_\_ Date: \_\_\_\_\_  
Highway Superintendent

\_\_\_\_\_ Date: \_\_\_\_\_  
Building Inspector

*The Building Inspector will not approve until proof of all required insurance, bonds, and easements are shown and the application fee is paid.*

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*For Office Use Only*

*Date* \_\_\_\_\_ *Required materials attached* \_\_\_\_\_ *Fee* \_\_\_\_\_ *Paid* \_\_\_\_\_

*Cash* \_\_\_\_\_ *Check* \_\_\_\_\_ *Money Order* \_\_\_\_\_ *Initial* \_\_\_\_\_

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**PLEASE SUBMIT:**  
**ONE (1) COPIE OF THIS COMPLETED FORM,**  
**TWO (2) COMPLETE SETS OF DRAWINGS (PRINTS), ND DESCRIPTIONS**  
**TWO (2) COMPLETE COPIES OF SPECIFICATIONS FOR THE PROJECT,**  
**AND**  
**TWO (2) COPIES OF PROOF REGARDING THE REQUIRED INSURANCE CERTIFICATE**  
**FEES, POLICIES, BONDS, EASEMENTS AND AGREEMENTS TO THE TOWN BUILDING**  
**INSPECTOR.**