Town of Pendleton

Building Department

DDD. 4



6570 Campbell Blvd. Lockport NY 14094 716-625-8833 Ext. 115 & 114 www.pendletonny.us

ACCESSORY STRUCTURE PERMIT APPLICATION

ree: \$	
Jobsite Location:	Date:
Contractor/Applicant:	Phone:
Address:	
Property Owner:	Phone:
Address:	
Use of Building:	REAR
Size of Building:	20° Min.
Height of Building:	
Estimated Cost:	15' Min SIDE
Building Access:	
By existing Driveway: New Driveway:	_ 150'Min
If New Driveway, Curb Cut Required:Yes No	
Additional Information:	FRONT
1. Current Survey is required for permit to be issued showing all but	nildings, septic, grinder, easements and setbacks.
2. One set of Construction Drawings are required showing sufficien	nt detail for the structure to be constructed.
 a. Per Section 403 of the 2020 Uniform Residential Code, all for over 10' tall at the eave must meet frost protection requirements. 	
b. All freestanding structures over 600 sq. ft. must be designed	
c. If using trusses, we must have a copy of the stamped truss co	
3. Electrical work must be inspected by a certified electrical inspect	
4. Allowable size of the structure will be directly related to lot sizes	•
5. Setbacks from side yard lot line is 15'. Setbacks from front yard	
6. Applicant shall call for required inspections. A final inspection is	
before a Certificate of Occupancy can be given. There shall be not is given.	o occupancy or storage in the structure until the Certificate
Applicant Signature:	Date:
	Inspector Approval: