



Town of Queensbury
742 Bay Road, Queensbury, NY 12804
P: 518-761-8256 www.queensbury.net

ACCESSORY STRUCTURE

Submission Requirements:

(i.e.: decks, sheds, detached garages, pole barns, solar panels, cell towers, etc.)

1. Completed Accessory Structure permit application (please print neatly or type)
2. Workers Compensation insurance information for **ALL** contractors involved in the project – this is REQUIRED EVEN FOR SOLE PROPRIETORS

THREE (3) COPIES (either 1 pdf & 2 paper (min. 11" x 17") OR 3 paper (min. 11" x 17") OF THE FOLLOWING:

3. Structural drawings, which may include:
 - a. Signed & sealed architect or engineer stamp **IF the cost of construction is over \$20,000**
 - b. Floor plan, if applicable
 - c. Foundation plan, if applicable
 - d. Cross sections, if applicable
 - e. Elevations, if applicable
 - f. Windows & door schedules, if applicable—printed on the drawings is acceptable
 - g. Calculation sheet for natural light, ventilation & emergency egress, if applicable – printed on the drawings is acceptable
4. Plot plan, using a survey map, if possible, which includes:
 - a. Drawn to scale (i.e. 1 inch = 30 feet)
 - b. Indicate the proposed changes with setbacks to the property lines
 - c. Include **all** structures on the property
 - d. Include the location of water supply (well or water lines)
 - e. Include the location & configuration of the septic system or sewer line
5. REScheck (for residential projects) or COMcheck (for commercial projects), **signed and stamped**, if applicable – please visit www.energycodes.gov for more information

ADDITIONAL IMPORTANT INFORMATION:

1. Any **changes to the approved plans prior to or during construction** will require the submittal of amended plans, additional reviews and re-approval.
2. If, for any reason, the building permit application is **withdrawn**, 30% of the fee is retained by the Town of Queensbury. After **1 year from the initial application date**, 100% of the fee is retained.



ACCESSORY STRUCTURE PERMIT APPLICATION

742 Bay Road, Queensbury, NY 12804
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Office Use Only

Permit #: _____

Permit Fee: \$ _____

Invoice #: _____

Flood Zone? Y N Reviewed By: _____

Project Location: _____

Tax Map ID #: _____ Subdivision Name: _____

PROJECT INFORMATION:

TYPE: ☐ Residential ☐ Commercial, Proposed Use: _____

STRUCTURE:

- ☐ Boathouse (with or w/o sundeck) ☐ Canopy ☐ Carport ☐ Cell Tower ☐ Deck
☐ Detached Garage (>300 s.f.) ☐ Dock ☐ Gazebo ☐ Pavilion ☐ Pole Barn ☐ Porch ☐ Ramp
☐ Shed (<300 s.f.) ☐ Solar Panels (w/o rafter upgrades) ☐ 3-Season Porch ☐ Other: _____

SQUARE FOOTAGE OF STRUCTURE:

1st floor: _____

2nd floor: _____

Total square feet: _____

Brief description of scope of project: _____

ADDITIONAL PROJECT INFORMATION:

1. Estimated Cost of Construction: \$_____
2. Are there any structures not shown on the plot plan? ☐ YES ☐ NO Explain: _____
3. Are there any easements on the property? ☐ YES ☐ NO

DECLARATION:

1. I acknowledge that no construction shall be commenced **prior to the issuance** of a valid permit and will be completed within a 12 month period. Any **changes to the approved plans prior to/during construction** will require the submittal of amended plans, additional reviews and re-approval.
2. If, for any reason, the building permit application is **withdrawn**, 30% of the fee is retained by the Town of Queensbury. After 1 year from the initial application date, 100% of the fee is retained.
3. If the work is not completed by the 1 year expiration date the permit **may be renewed**, subject to fees and department approval.
4. I certify that the application, plans and supporting materials are a true and a complete statement and/or description of the work proposed, that all work will be performed in accordance with the NYS Building Codes, local building laws and ordinances, and in conformance with local zoning regulations.
5. I acknowledge that **prior to occupying** the facilities proposed I, or my agents, will obtain a certificate of occupancy.
6. I also understand that I/we are **required to provide** an as-built survey by a licensed land surveyor of all newly constructed facilities prior to issuance of a certificate of occupancy.

I have read and agree to the above:

PRINT NAME: _____

SIGNATURE: _____ DATE: _____

CONTACT INFORMATION:

PLEASE PRINT LEGIBLY OR TYPE, PLEASE INCLUDE AN EMAIL

• **Applicant:**

Name(s): _____
Mailing Address, C/S/Z: _____
Cell Phone: _____ Land Line: _____
Email: _____

• **Primary Owner(s):**

Name(s): _____
Mailing Address, C/S/Z: _____
Cell Phone: _____ Land Line: _____
Email: _____

☐ **Check if all work will be performed by property owner only**

• **Contractor(s):** (List all additional contractors on the back of this form)

Contractor Name(s): _____
Contractor Trade: _____
Mailing Address, C/S/Z: _____
Cell Phone: _____ Land Line: _____
Email: _____

****Workers' Comp documentation must be submitted with this application****

• **Architect(s)/Engineer(s):**

Business Name: _____
Contact Name(s): _____
Mailing Address, C/S/Z: _____
Cell Phone: _____ Land Line: _____
Email: _____

Contact Person for any questions regarding this project: _____
Cell Phone: _____ Land Line: _____
Email: _____

- **Contractor(s): Workers' Comp documentation must be submitted with this application**

Contractor Name(s): _____
Contractor Trade: _____
Mailing Address, C/S/Z: _____
Cell Phone: _____ Land Line: _____
Email: _____

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