

# Application for Residential Compliance Permit



PLANNING & BUILDING DEPARTMENT  
 85 EAST MAIN STREET 585-742-5035  
 VICTOR NY 14564 585-924-0202 FAX  
 www.townofvictorny.gov codes@townofvictorny.gov

## INSTRUCTIONS

The undersigned hereby makes application for a compliance inspection for work completed without a permit. As part of our review, the code enforcement official will inspect the site and list necessary changes to bring the area into compliance. After the permit is issued, the work must be completed and re-inspected before we will issue the certificate of compliance.

### COMPLETE PERMIT PACKAGE CHECKLIST

**Incomplete applications will not be accepted**

- Completed application
- sketch floor or plot plan, including dimensions, showing work to be inspected

Address \_\_\_\_\_

Today's date \_\_\_\_\_

#### Items to be inspected:

- Basement renovation
- Deck
- Fence
- Generator
- Shed
- Pool
- Hot tub
- Other \_\_\_\_\_

**OUR OFFICE ISSUES COMMENTS AND FINAL CERTIFICATES VIA EMAIL.  
 PLEASE DOUBLE CHECK EMAIL ADDRESSES.**

Applicant's Name _____	Best phone # _____
Applicant's Address _____	
Applicant's Email _____	
Owner's Name _____	Best phone # _____
Owner's Address _____	
Owner's Email _____	

*Acceptance does not relieve the agent, applicant, architect, builder, engineer, or owner from complying with any of the provisions of the NYS Building Code, Energy Code, SEQRA Act, Local Zoning, etc., whether stated, implied, or omitted in the plans and specifications submitted for the building permit. Incorrect information may result in revocation of permit.*

Signature of Applicant: \_\_\_\_\_

Date \_\_\_\_\_

16Dec24 Version

### For Office Use Only

Signature

Date

Examined by \_\_\_\_\_

Total Permit Fee \_\_\_\_\_

Approved/Denied by \_\_\_\_\_

Receipt # \_\_\_\_\_

Permit # \_\_\_\_\_

Date Issued \_\_\_\_\_