Peter G. Crummey Town Supervisor

TOWN OF COLONIE

Building and Fire Services Department

Public Operations Center 347 Old Niskayuna Road Latham, New York 12110

Phone (518) 783-2706 Fax (518) 783-2772 www.colonie.org/departments/building

Wayne Spenziero Manager

THIS FORM MUST BE COMPLETED AND SUBMITTED WITH APPLICATION FOR BUILDING AND ZONING PERMIT

		Date			
PROJECT					
ROJECT ADDRESS					
_	ımber Street				
OWNER					
COMPLETE	THE FOLLOWING	PER NEW Y	ORK STATE	BUILDING CO	ODE
	on by Occupancy				022
502 Classification	Classification by Construction				
704.1 Special Insp	Special Inspections Required Yes No No				
If yes, the a	If yes, the applicant shall submit a statement of special inspections prepared by the				
	esign professional as				
	mplete list of work re				
	nd a list of individual				
	ng such inspections.		•		
Does the "N	lew York State Existing	ng Building Co	ode" (for existin	g buildings) app	oly?
Yes N					
If yes, list c	hapter(s) used				
What areas	If yes, list chapter(s) used				
A 1 C		RE AREA	C		
	e area				
	e per Code – Table 50	6.2 a,b	•	C	
	(1) Frontage Increasesq. ft. (2) Automatic sprinkler systemsq. ft.				
(07 (2) Auto	11				
TOTAL PERMITTE	D FIRE AREA			sq. ft.	
Explain basis for increase					
Actual building height		ft. Actu	al No. of stories		
Allowable building heigh	nt (Table 504.3a)	ft. Allo	wable No. of s	tories (Table 5	504.4 a,b)_
The haritaline demand fine an		Emiatin a 🗆	Duon oca d	A ltanation 🗆	N/D
The building/space fire sp	Existing Existing	Proposed	Alteration \[\]	N/R N/R	
The building/space smoke	Existing Existing	Proposed	Alteration \[\]	N/R N/R	
The building/space fire ala	iriii system is:	Existing	Proposed	Alteration□	N/R
ignature of architect or engined	er		ephone number		
· ·					
rint name of architect or engineer		Ad	Address		