



# TOWN OF COLONIE

**Building Department**  
Public Operations Center  
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Latham, New York 12110

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Director

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

Date \_\_\_\_\_

PROJECT \_\_\_\_\_

PROJECT ADDRESS \_\_\_\_\_  
Number Street

OWNER \_\_\_\_\_

### COMPLETE THE FOLLOWING PER NEW YORK STATE CODE(S)

301 Classification by Occupancy \_\_\_\_\_

602 Classification by Construction \_\_\_\_\_

1704.1 Special Inspections Required Yes  No

If yes, the applicant shall submit a statement of special inspections prepared by the registered design professional as a condition for permit issuance. This statement shall include a complete list of work requiring special inspections, the inspections to be performed and a list of individuals, approved agencies or firms intended to be retained for conducting such inspections.

Does the existing New York State Building Code apply? Yes  No

If yes, list chapter(s) used \_\_\_\_\_

### FIRE AREA

Actual fire area \_\_\_\_\_ sq. ft.

Allowable per Code – Table 503 \_\_\_\_\_ sq. ft.

506.2 (1) Frontage Increase \_\_\_\_\_ sq. ft.

506.3 (2) Automatic sprinkler system \_\_\_\_\_ sq. ft.

**TOTAL PERMITTED FIRE AREA** \_\_\_\_\_ sq. ft.

Explain basis for increase \_\_\_\_\_

Actual building height \_\_\_\_\_ ft. Actual No. of stories \_\_\_\_\_

Allowable building height (Table 503) \_\_\_\_\_ ft. Allowable No. of stories (Table 503) \_\_\_\_\_

Is building equipped with an automatic sprinkler system? YES \_\_\_ NO \_\_\_

Is building equipped with a fire alarm system? YES \_\_\_ NO \_\_\_

Is building equipped with a fire & smoke detection system? YES \_\_\_ NO \_\_\_

Comments:

Signature of architect or engineer \_\_\_\_\_

Telephone number \_\_\_\_\_

Print name of architect or engineer \_\_\_\_\_

Address \_\_\_\_\_