

Village of Liverpool

310 Sycamore Street, Liverpool, NY 13088 Phone: (315) 457-3441, Fax: (315) 457-5119 Email: codes@villageofliverpool.org

Driveway/ Parking Area Permit Application

All applicable sections of this application must be completed or the application will be returned.

OFFICE USE ONLY				
Permit Number:	Date Received:			
Approved By:	Date Approved:			
Project Value: \$	Permit Fee: \$			
Denied By:	Date Denied:			
Reason Denied:				

be completed or the application will be returned.				Reason Denied:			
PROPERTY LOCATION & OWNER							
PROPERTY ADDRESS				TAX MAP NO.	ZONING		
PROPERTY OWNER	ADDRESS □ Same as abo	nve		OWNER PHONE			
	Nooness E same as ase	310					
CITY	STATE	ZIP		OWNER EMAIL			
APPLICANT ☐ Same as above							
NAME				RELATIONSHIP TO OWNER			
ADDRESS				PHONE			
CITY	STATE	ZIP		EMAIL			
PROJECT							
PROJECT THE UNDERSIGNED HEREBY MAKES APPLICATION	FOR THE FOLLOWING DRIVEW	/AV PROJEC	T - CHECK ALL	THAT APPLY			
					· ovict)		
·		_ new u	iliveway oi	parking area (where one does not			
PROJECT TYPE - CHECK ALL THAT APPLY				ESTIMATED COST OF ALL WORK – MA	TERIALS AND LABOR		
☐ Residential ☐ Commercial	☐ Driveway ☐ Park	king Area	a	\$			
Is the project on a corner lot? \square Yes \square] No		Width of the lot at the street:				
			WIDTH OF TH	WIDTH OF THE DRIVEWAY AT THE			
Does the driveway cross a village sidev	valk? ☐ Yes ☐ No		Street Edge: Public Sidewalk:				
			Street Lug	ge. Fublic Sidew	rain.		
DRIVEWAY / PARKING AREA SURFACE MATERIAL	D.:						
Existing: Proposed:							
FOR COMMERCIAL PROJECTS ONLY							
Has planning board approval been obtained for this project? \square Yes \square No \square If yes, date of approval:							
Has a storm water management plan been prepared? ☐ Yes ☐ No If yes, date of approval:							
CONTRACTOR							
COMPANY NAME			ADDRESS				
CONTACT NAME PHO	INE		EMAIL				
*Please attach a copy of the estimate a	nd include a diagram of	f the wo	rk area.				
APPLICANT CERTIFICATION							
I agree this permit is only for the work	described, and does no	t grant p	ermission fo	or additional or related work that	requires separate		
permits. I hereby certify that the proposed work is authorized by the owner, and that I am authorized by the owner to make this application							
as his/her authorized agent. I agree to conform to all applicable laws of the State of New York and the Village of Liverpool. All information on							
this permit application is accurate to the best of my knowledge.							
Consent to Enter Property: By signing this application I agree to allow representatives of the Village access to the above referenced							
property at reasonable times to ascerta	in compliance with any	y resultin	ng permit.				
SIGN HERE	PRINT NAME			DATE			

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A)	Comple	te all applicable sections of this Application.					
B)	Sign and	d date the bottom of the application.					
C)	Submit the following required items with your completed application: (Some may not be applicable to your project)						
	A copy of your property survey						
	A complete plan and description of the project including all dimensions						
	Commercial projects may require planning board review and approval.						
	Contractor Insurance Certificates with the Village of Liverpool as certificate holder:						
	0	General Contractor's Liability Insurance Certificate					
	0	General Contractor's Workman's Compensation Insurance Certificate or exemption					
		Please Note: ACORD forms, while acceptable proof of General Liability Insurance, are NOT acceptable as proof of NYS Worker's Compensation Insurance or Disability Benefits Insurance coverage!					
	0	General Contractor's Disability Insurance Certificate					

- D) Typical applications take 1-2 days to review.
- E) Length of validity. Permits shall be valid for 12 months from date of issue. An extension may be granted, provided that such an application shall be made in writing prior to the end of the first year and good cause is shown. An extension request may require review by the Zoning Board of Appeals.
- F) Call 811 Before You Dig! You must call for a location request at least two working days but not more than 10 working days before any excavation starts.
- G) The applicant shall be responsible for:
 - a. 1. Calling 811 before bringing heavy equipment on site or excavating.
 - b. 2. Erosion, runoff, and siltation control measures in accordance with New York State guidelines.
 - c. 3. Dust, mud, and debris control on public highways.
 - d. 4. Reclamation of village property including suitable replacement of ground cover, topsoil and seeding.
 - e. 5. The entire cost of reclamation should agents of the Village be required to complete said reclamation.