



TOWN OF FALLSBURG
CODE ENFORCEMENT OFFICE

Member: New York State Building Officials Conference, Inc.

Application # _____

5250 Main St
South Fallsburg, NY 12
(845) 434-8
Fax: (845) 434-5

OPERATING PERMIT APPLICATION

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Part I
Applicant/Building Application

X Applicant's Name: _____ \$25.00 Fee, Check# _____

X Applicant's Address: _____

X Contact Person: _____ X Telephone: _____

X Address of Premises for which Operating Permit is requested: [] same as above

[] Other (specify): _____

Tax Map # (same as SBL#): _____ Current Occupancy Class: _____

Part II
Type Operating Permit

An Operating Permit is required to conduct any activity or to use any class of building listed below. Please indicate the type(s) of Operating Permit(s) requested by checking each applicable box. (If you require assistance, or would like more information, contact the [name of Authority Having Jurisdiction] [name department or office, such as "Building Department"] at [phone number].)

[] Manufacturing, storing or handling hazardous materials in quantities exceeding those listed in Tables 2703.1.1(1), 2703.1.1(2), 2703.1.1(3) or 2703.1.1(4), of the Fire Code of New York State (see 19 NYCRR Part 1225); (See Appendix A.) Identify the materials and quantities and describe the manner in which the materials will be manufactured, stored or handled (attach additional sheets if necessary):

[] Conducting a hazardous process or activity (including but not limited to, any commercial or industrial operation which produces combustible dust as a byproduct, fruit and crop ripening, and waste handling; (See Appendix B.) Describe the process(es) or activity(ies) to be conducted (attach additional sheets if necessary):

[] Use of pyrotechnic devices in assembly occupancies; (See Appendix C.) Describe the proposed use (attach additional sheets if necessary):

[] Use of a building containing one or more areas of public assembly with an occupant load of 100 persons or more (See Appendix D.) Describe the proposed use (attach additional sheets if necessary):



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OPERATING PERMIT APPLICATION FORM
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 Fax: (845) 434-5883

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The use of a building whose occupancy classification or use has been determined by the **Authority Having Jurisdiction** as posing a substantial potential hazard to public safety should refer to the appendix (**See Appendix E.**) Describe the **proposed use** of the building and describe the **primary use** of the building (if necessary attach additional sheets for the description):

Part III
Premises/Building Application

1. Date of last Inspection of Premises? _____

2. Has a Certificate of Occupancy been issued for the premises?

YES Type: Permanent Temporary Date of Issuance: _____
 NO

3. Date(s) of issuance of previous Certificate(s) of Occupancy? (If any): _____

4. Has a Certificate of Compliance been issued for these Premises?

YES Type: Permanent Temporary Date of Issuance: _____
 NO

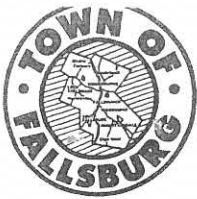
5. Are there currently any open Building Permits associated with the premises? YES NO
 If yes, please describe (attach additional sheets if necessary):

6. Have any violations to the Uniform Code been issued in relation to the Premises? YES NO

If yes, please describe (attach additional sheets if necessary):

7. Have any variances to the Uniform Fire Prevention and Building Code been granted in relation to these premises?

YES NO If yes please describe (attach additional sheets if necessary): (Include Variance Decision Number)



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Part III (continued)

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8. Additional Comments

Attention: Any changes to the store front, including signage, permanent or temporary, must be reviewed by the "Architectural Review Board"(ARB) PRIOR to making any of these changes. Contact the Code Enforcement Department for the ARB application.

SIGNATURE OF APPLICANT

I hereby certify that the foregoing information (and all information in attached sheets, if any) is true and complete.

X _____ X _____
Signature of Applicant OR Authorized Representatives Signature Date

X _____
Name [PLEASE PRINT] (and If Applicable) Title of the person signing Application

Part IV

To be completed by the TOWN OF FALLSBURG

Inspection Required YES NO

Inspections Performed YES NO Date of Inspection: _____

Tests or Reports required to verify compliance? YES NO

If YES, have Tests or Reports been received? YES NO

Description: _____

Required Testing is for:
- Sprinkler System
- Fire Alarm System
- Fire Extinguishers

Application(s) Approved: YES NO

Operating Permit Issued By: _____

Date Operating Permit Issued: _____ Date Operating Permit Expires: _____

Type/Description of Operating Permit: _____

◆Conditions of Operating Permit (list conditions here AND in the space provided in the Operating Permit):
All store front changes and new signage must be reviewed by the ARB; PRIOR to the changes. All dumpsters must be in a compliant enclosure-building must be properly numbered-recycling is mandatory

Additional Comments:

Applicant agrees to store closing inspection – current sprinkler, fire alarm or extinguisher inspections must be provided. Aisle width must be a minimum of 44". Required Floor Plan (may use the back of this page.



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9. Additional Comments

Any new electrical work must be done by an electrician licensed in Sullivan County.

All new electrical work must be inspected by a 3rd party inspector to complete this application process. Failure to provide an electrical inspection is grounds for denial. An Operating Permit must be obtained before opening this establishment. A fee of \$25.⁰⁰ is required. All checks make payable to the Town of Fallsburg.

Please provide a floor plan of the premises the operating permit is for and include tables, chairs, counters, doors & windows, etc.

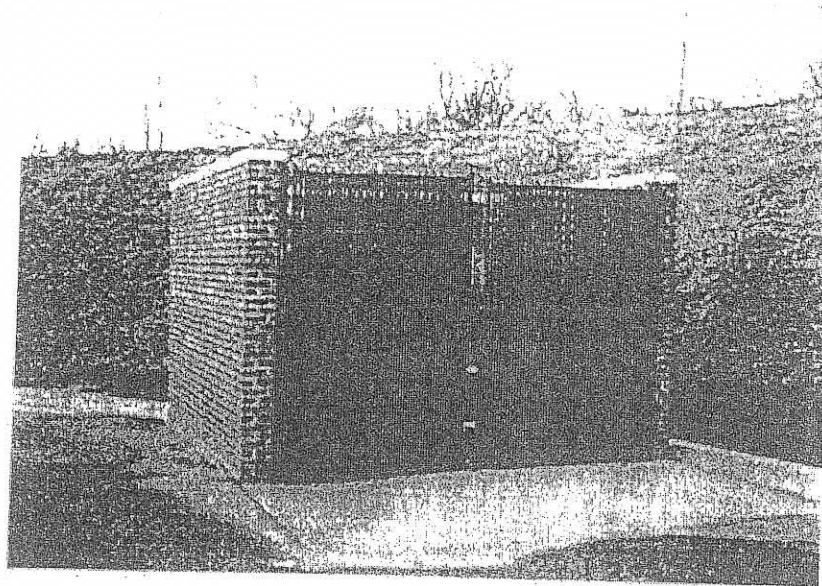


Photo: Appropriate means of enclosing a trash container.

- (1) Refuse containers must be enclosed on four sides. Three walls shall consist of brick, block, or other masonry material; and/or stockade wood fence set upon a concrete slab. The opening shall be fully enclosed using chain link fence doors with neutral or earth-tone colored slats as depicted in the photo above. Such containers shall be prohibited within the front yard of any development and shall be located within a designated service area to the rear or side of the commercial or industrial establishment and out of view of public rights-of-way. All refuse and waste storage containers shall be screened from adjoining properties. Landscaping around the base of the walls that enclose the trash container shall also be required. Multifamily and townhouse developments exceeding 16 dwelling units shall be required to provide trash compactors within centralized containers along with separate recycling containers.
- (2) Refuse compactors.
 - (a) Existing multifamily properties, townhouse developments and bungalow colonies with 16 or more dwelling units shall be required to provide trash compactors when it has been documented by the Code Enforcement Officer that violations of garbage accumulation and/or enclosure maintenance exist on a continuing, recurring basis.
 - (b) All newly installed and existing compactors within the Town of Fallsburg shall be screened from public view on four sides, set upon a concrete slab, shall not be stored in any front of any business or residence and shall be placed a minimum of 50 feet from any property line, public road or public right-of-way. Compactors not being used for 30 days or more shall be emptied of all contents.

