



OPERATING PERMIT APPLICATION

TOWN OF ULYSSES BUILDING & CODE DEPARTMENT

10 Elm Street, Trumansburg, NY 14886 • 607.387.5767 • permits@townofulyssesny.gov

Instructions: Complete the following application and return to the Ulysses Building and Code Department.

- Applications may be submitted digitally to permits@townofulyssesny.gov, or mailed or brought to the Town Hall at 10 Elm St, Trumansburg, NY 14886.
- After receipt of a complete application is confirmed, an inspection may be scheduled.
- Fees must be paid prior to the inspection.
- If the operating permit is for a **Mobile Food Preparation Vehicle**, please complete and attach the "Mobile Food Vendor Application" form with this submission.

Incomplete applications will not be processed.

<i>OFFICE USE ONLY: PERMIT #:</i>		<i>FEE:</i>		<i>CHECK #:</i>	
PART I: BUSINESS LOCATION INFORMATION					
BUSINESS NAME					
LOCATION ADDRESS					
CITY		STATE		ZIP	
PARCEL ID #					
OCCUPANCY CLASS					
MAILING ADDRESS	<input type="checkbox"/> Same as location address				
ADDRESS					
CITY		STATE		ZIP	

PART II: CONTACT INFORMATION					
OWNER(S) CONTACT					
NAME					
ADDRESS					
CITY				ZIP	
PHONE		EMAIL			
NAME					
ADDRESS					
CITY				ZIP	
PHONE		EMAIL			
MAIN CONTACT					
If different from owner, please indicate who the point of contact will be for scheduling and communications.					
NAME					
PHONE		EMAIL			

PART III: TYPE OF OPERATING PERMIT

An Operating Permit is required to conduct any activity or to use any class of building listed below.

A. Please indicate the type(s) of Operating Permit(s) requested by checking each applicable box.

B. For each section that is checked, provide a description. Attach additional sheets if necessary.

1. Manufacturing, storing, or handling hazardous materials in quantities exceeding those listed in the 2020 Fire Code of New York State. Identify the materials and quantities and describe the manner in which the materials will be manufactured, stored or handled:

2. 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. Describe the process(es) or activity(ies) to be conducted:

3. Use of pyrotechnic devices in assembly occupancies. Describe the proposed use:

4. Use of a building containing one or more areas of public assembly with an occupant load of 50 persons or more. Describe the proposed use:

5. Use of a building whose use or occupancy classification has been determined by the Ulysses Code Enforcement Officer as posing a substantial potential hazard to public safety. Describe the proposed use:

6. Use of a Mobile Food Preparation Vehicle that contains cooking equipment that produces smoke or grease-laden vapors for the purpose of preparing and serving food to the public. **(Applicants must complete the “Mobile Food Vendor Application” and submit all applicable attachments.)**

PART IV: PREMISES INFORMATION

1. Date of last inspection?	
2. Has a Certificate of Occupancy been issued for the premises?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary Date of Issuance: _____
3. Has a Certificate of Compliance been issued for the premises?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary Date of Issuance: _____
4. Are there any active Building Permits associated with the premises?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide permit number: _____
5. Have any violations to the Uniform Code been issued in relation to the Premises?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please describe (attach additional sheets if necessary):
6. Have any variances to the Uniform Fire Prevention and Building Code been granted in relation to these premises?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please describe and provide variance decision number (attach additional sheets if necessary):

Authorization: I am the owner or am authorized by the owner to sign and submit this application. I certify under penalty of perjury of the laws of the State of New York that the information on this application and all information submitted herewith is true, complete, and correct.

SIGNATURE	
PRINT NAME	
DATE	