



(Oct 2024)

# SELF-SERVE PERMITTING INSTRUCTIONS

## FENCES (commercial districts)

### HELPFUL INFORMATION:

- Fences must be located completely within the subject property boundaries.
- Maximum fence height is 8'.
- A 10' perimeter landscaped setback is required for a fence proposed along a street frontage except a decorative fence or wall (maximum 3' in height) with landscaping may be within the 10'
- The finished or "best" side must face the neighboring property.
- Fences installed within a preservation district will require additional review.

---

### MINIMUM SUBMISSION REQUIREMENTS:

- ✓ Complete permit application.
- ✓ Detailed work scope description (including height, amount, and material of fencing)
- ✓ Instrument survey map showing proposed location of fence
- ✓ Construction drawings/Plans drawn to scale which include: location of fence and landscaping plan (if applicable)
- ✓ Photographs when possible
- ✓ Insurance Certificates (see attached information sheet)

---

### HOW TO SUBMIT:

 Your completed permit application package can be submitted by:

- Email: [zoning@cityofrochester.gov](mailto:zoning@cityofrochester.gov)
- In person Monday, Wednesday, Friday 9am - 4pm only
- **Closed to walk- ins Tuesdays and Thursdays**
- Drop box provided at City Hall A Building lobby
- Mail: The Bureau of Zoning & Permitting  
30 Church Street, Room 121B  
Rochester, NY 14614

If you have questions, email: [zoning@cityofrochester.gov](mailto:zoning@cityofrochester.gov) or call (585) 428-7043 for additional instructions. **Incomplete application submissions will be returned.** Thank you.





# BUILDING PERMIT APPLICATION and ZONING COMPLIANCE REQUEST

PROPERTY ADDRESS: \_\_\_\_\_

USE:  RESIDENTIAL (1 or 2 Family)  COMMERCIAL  MIXED USE

## APPLICANT INFORMATION:

YOUR NAME: \_\_\_\_\_ YOUR PHONE NUMBER: \_\_\_\_\_  
(not a company name)

YOUR EMAIL ADDRESS: \_\_\_\_\_

YOUR MAILING ADDRESS: \_\_\_\_\_

### PROPERTY OWNER:

Check if same as applicant above

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(Cannot be a PO Box) (include City or Town)

Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### CONTRACTOR: (check if same as:)

Owner  Applicant (check both if applicable)

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(Cannot be a PO Box) (include City or Town)

Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

ARCHITECT: \_\_\_\_\_  
OR ENGINEER

## PERMIT REQUEST:

DESCRIPTION: \_\_\_\_\_

ADDITION/NEW CONSTRUCTION  INTERIOR RENOVATIONS  EXTERIOR RENOVATIONS

CHANGE/ESTABLISH USE  DECK  POOL/HOT TUB  SHED/GARAGE/CARPORT

HVAC/MECHANICAL/ELECTRICAL SYSTEMS  OTHER: \_\_\_\_\_

PROJECT COST ESTIMATE: (excluding plumbing & electrical) \$ \_\_\_\_\_

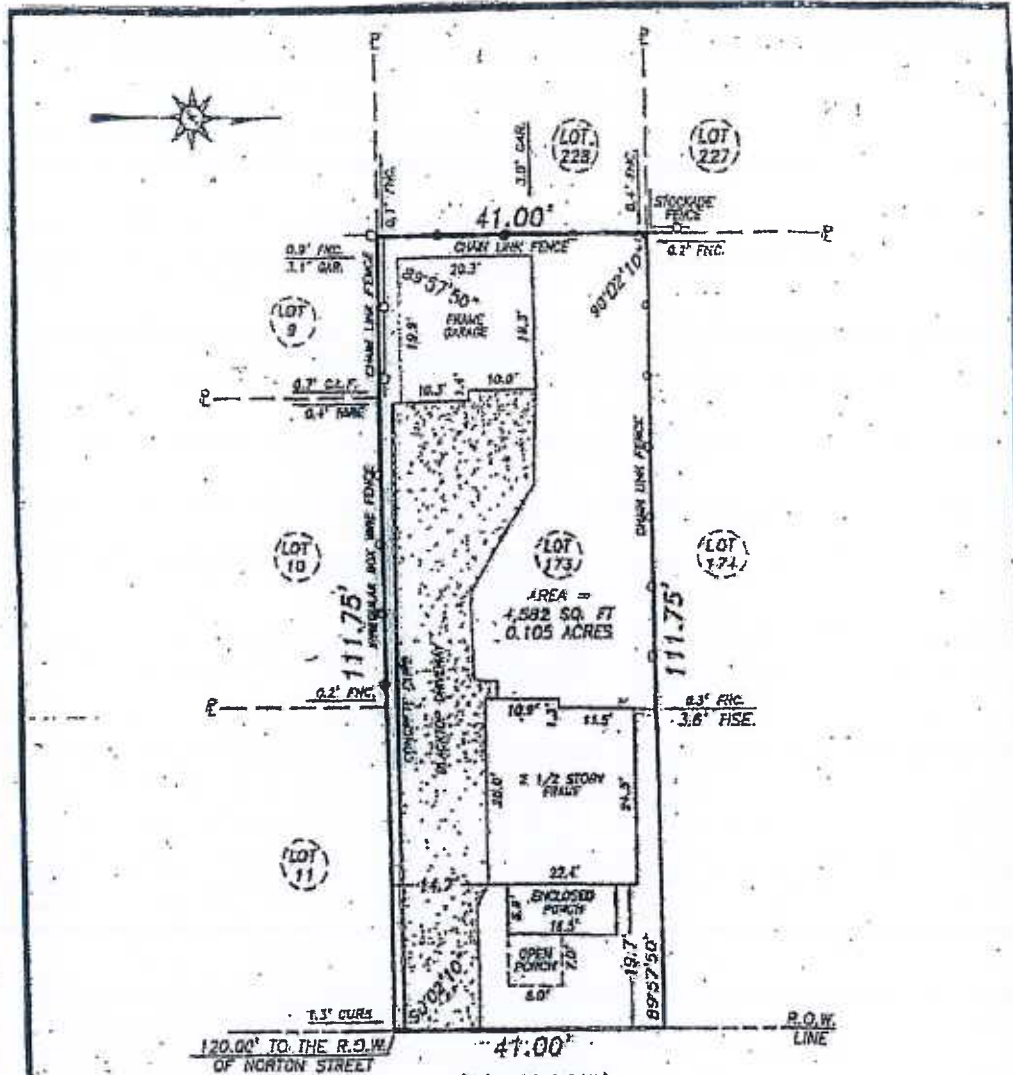
YOUR SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

# SAMPLE INSTRUMENT SURVEY MAP

## NOTE:

- This is a sample of an Instrument Survey Map.
- The property owner should have received a copy at their closing.
- If you do not have one, you can check with your mortgage company or the attorney who handled your closing.
- The City does not keep copies of Instrument Survey maps.
- If you need to have a new one made, you need to call a Land Surveyor.



### CERTIFICATION:

I, DAVID J. STAUB, HEREBY CERTIFY TO:  
 -DESIRÉE RODRIGUEZ-MENDEZ  
 -HARVEY S. BUNKS, ESQ.  
 -THE BANK OF CASTLE, ITS SUCCESSORS AND/OR ASSIGNS  
 -UNDERBERG & KESSLER, LLP  
 -THE TRIC INSURANCE COMPANY INSURING THE MORTGAGE

THAT THIS MAP WAS MADE OCTOBER 19, 2017  
 FROM NOTES OF AN INSTRUMENT SURVEY  
 COMPLETED OCTOBER 3, 2017  
 AND REFERENCES LISTED HEREON.

### REFERENCES:

- 1.) LIBER 39 OF MAPS, PAGE 5.
- 2.) LIBER 11056 OF DEEDS, PAGE 59.
- 3.) ABSTRACT OF TITLE No. 412329 (FIRST AMERICAN).

NOTES: 1.) PREMISES SUBJECT TO ALL EASEMENTS, RESTRICTIONS & COVENANTS OF RECORD  
 AND REFERENCED IN ABSTRACT OF TITLE  
 2.) THE USE OF THIS MAP IN CONNECTION WITH AN AFFIDAVIT OF NO CHANGES,  
 INCLUDES THE SURVEYOR OF ALL RESPONSIBILITY

N.Y.S.A.L.S. No. 50291

DATE

**INSTRUMENT SURVEY MAP**  
 BEING LOT No.  
 OF THE RALEIGH SUBDIVISION,  
 CITY OF ROCHESTER, COUNTY OF MONROE, STATE OF NEW YORK

When marked elevations are provided in a survey with bearings, a normal level correction shall be a violation of Section 2208, sub-section 2, of the New York State Constitution.  
 Only copies from the original of this surveying plan or original of the town surveyor's plan for use shall be authorized by the said town surveyor.  
 The Professional Engineer, hereby certifies that this survey was prepared in accordance with the Surveying Code of Practice for Land Surveyors promulgated by the New York State Association of Professional Land Surveyors. Said certification shall not apply to the extent that the survey is prepared in violation of the Code of Practice for Land Surveyors, promulgated by the New York State Association of Professional Land Surveyors. Certification is a true and correct copy of the original of the surveying plan.  
 The Professional Engineer of Triple Point Land Surveying, LLC, hereby certifies that this survey was prepared in accordance with the Surveying Code of Practice for Land Surveyors promulgated by the New York State Association of Professional Land Surveyors.

**TRIPLE POINT LAND SURVEYING, LLC.**  
 10 EAST 44TH STREET SUITE 310  
 ROCHESTER, NEW YORK 14614  
 PHONE (585) 285-8800  
 FAX (585) 285-2881  
 TRIPLEPOINTLANDSURVEYING@YAHOO.COM

SCALE: 1" = 20'      JOB NO.: 91.64-1-12      DATE: 1429-17      OCT. 19 2017

**CITY OF ROCHESTER**  
**BUILDING PERMIT FEES**  
**AS OF JULY 1<sup>ST</sup>, 2028**

PROJECT COST		FEE		PROJECT COST		FEE
\$0	\$2,000	\$50		\$30,000	\$32,000	\$350
2,001	4,000	70		32,001	34,000	370
4,001	6,000	90		34,001	36,000	390
6,001	8,000	110		36,001	38,000	410
8,001	10,000	130		38,001	40,000	430
10,001	12,000	150		40,001	42,000	450
12,001	14,000	170		42,001	44,000	470
14,001	16,000	190		44,001	46,000	490
16,001	18,000	210		46,001	48,000	510
18,001	20,000	230		48,001	50,000	530
20,001	22,000	250		50,001	52,000	550
22,001	24,000	270		52,001	54,000	570
24,001	26,000	290		54,001	56,000	590
26,001	28,000	310		56,001	58,000	610
28,001	30,000	330		58,001	60,000	630

FORMULAS	
\$ 60,000 to 100,000	.009 x Cost + 150 = Fee
\$100,001 to 500,000	.007 x Cost + 375 = Fee
\$500,001 to 1,000,000	.005 x Cost + 1,475 = Fee
\$1,000,001 and over	.003 x Cost + 3,675 = Fee

## **WORKERS' COMPENSATION INSURANCE**

The State of New York requires that, prior to issuing any permits, the City of Rochester be provided with proof of Workers' Compensation Insurance coverage or provide proof of exemption from such coverage.

One of the following certificates must be provided by the applicant with each permit request:

- C105.2 or U-26.2 – Workers' Compensation Insurance (private carrier)  
(contractor with employees)
- CE-200 - Exemption Certificate  
(contractor with no employees)
- BP-1 – Affidavit of Exemption  
(owner-occupied 1-4 family & owner if performing work)
- S112 or GSI-105.2 – Self Insurance coverage

### Helpful Hints:

- To obtain a CE 200 Exemption
  - <https://www.businessexpress.ny.gov/>
  - Workers' Compensation Board location at 130 W. Main Street (verify if open by calling 1-877-632-4996)
- Certificates for building permits are job-specific and a separate certificate will be required for each building permit.
- NYS does NOT accept "ACORD" Certificates nor will they accept faxed copies.